Admin, LACO

Subject: FW: Committee for End of Life Choices

From: Terry Meo

Sent: Monday, 23 October 2017 7:07 AM

To: Joint Select Committee on End of Life Choices < eolcc@parliament.wa.gov.au >

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To the Committee for End of Life Choices.

I am sending this e-mail in response to the invitation to provide a submission to you as part of the committee's enquiries.

I have been practicing as a pharmacist for 37 years. I enjoy my profession, take pride in being able to inform customers and patients about their medication and health concerns and help them achieve a healthier lifestyle. Pharmacy advocates evidence-based therapies to gain the most effective therapeutic outcomes for our customers. We are always trying to improve our knowledge and stay at the forefront of medicine in dispensing the latest pharmaceuticals and continuously advising our customers about dosages, important adverse effects, precautions and ensuring compliance.

I have seen many of my customers and patients, who have become like family over the years, die a dignified death. Fortunately in Australia we have a marvellous facet of medicine called palliative care for the end stage of dying. No one needs to die in pain and distress in our lucky country as our Medicare system provides avenues for all people to access this excellent medical faculty. It promotes a means for any Australian person to die in peace and comfort. We all start our lives totally dependent on others and often when we die we also become dependent on other caring people. Human persons should not choose to die, that is a natural course event that everyone will face in their life. They may choose not to accept antibiotics or other medical interventions and let his or her life-course end naturally. This is not suicide. However, taking medication to end one's life is suicide, and I as a pharmacist will never dispense a prescription that will assist in achieving this goal, as I would regard myself as assisting suicide.

Patients with severe endogenous depression or major psychoses often need to resist the desire to end their lives as suicide may become such a desirable course for their lives. These patients need urgent medical interventions and when they have recovered, they are frequently very thankful they didn't act on what they thought was right and proper at the time.

Australians are very fortunate to have many caring community and religious groups that go out of their way to help others in need.

Voluntary euthanasia and/or assisted suicide go against the original Hippocratic oath doctors often swear by when accepting their graduation from medical school. Australian society needs to seek ways to value and preserve life, and not support those who want to die. Life is precious and we should be doing all we can to preserve it, not destroying it. A legislative environment that facilitates assisted suicide weakens society, and sends a contradictory message to society's various efforts in preventing suicide (due to depression and despair) and reducing its rate.

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Please take my concerns into consideration prior to establishing any recommendations in the committee report.
Thank you.
Sincerely,
Mr Terry Meo F.P.S.