

The Catholic Doctor is In

Problems with Living Wills

In last month's column, I covered the most thorough way to make your wishes known for end-of-life care in the event that you are incapacitated. This month I cover problems with written documents related to end-of-life care: Living Wills, Advanced Medical Directives, Physician Orders for Scope of Treatment (POST), and Physician Orders for Life-Sustaining Treatment (POLST). I will use the term 'Living Will' to include all such forms.

Origin of Living Wills – Surprise!

In 1930, a young American lawyer, Luis Kutner, established the first Euthanasia Society in the United States, but it didn't catch on. However, only eight years later, the Euthanasia Society of America (ESA) was founded and tried to change laws to allow euthanasia (killing of patients). By the mid-1960s, the ESA had not succeeded in legalizing euthanasia anywhere, so it took a step back and decided that in order to prepare more people to accept 'mercy-killing', it would have to promote the "right of the individual to consent to or refuse medical treatment" (website of The World Federation of Right to Die Societies).

In 1967 the now older American Lawyer, Luis Kutner, worked with the ESA to develop the first Living Will. Dear Abby (Abigail van Buren), a fellow member of the ESA and euthanasia supporter, popularized the Living Will in her widely read columns. California became the first state to adopt Living Will legislation in 1976, and by 1992, Living Will legislation had passed in all 50 states.

Living Wills gained acceptance because of the common sense idea that people would want the freedom to reject unnecessary medical intervention that was only delaying an inevitable death. In fact, in his 1980 Declaration on Euthanasia, Blessed Pope John Paul II affirmed that patients may reject "extraordinary" or "disproportionate" care with due consideration of potential benefits and burdens. In the same document, though, he explicitly rejected euthanasia defined as "an action or an omission which of itself or by intention causes death, in order that all suffering may in this way be eliminated."

The link between Living Wills and Euthanasia has been expressed by supporters of euthanasia. A *USA Today* headline of an article interviewing euthanasia advocates

(8/16/1985) read “Living Wills 1st Step, Euthanasia Group Says.” In 1986, Derek Humphry, author of a “how-to” book on assisted suicide and founder of the Hemlock Society (now known as Compassion & Choices) that works to mainstream a universal right to euthanasia, said: “We have to go stage by stage, with the living will, with the power of attorney, with the withdrawal of this; we have to go stage by stage. Your side would call that the 'slippery slope...”

Your words may be used against you

I recommend that you discuss your end-of-life wishes before you contract a terminal illness or injury. I strongly recommend that you do not fill out a Living Will under pressure *or without* designating a health care representative. Living Wills cannot predict and provide for every possible scenario ahead of time; they are too limited. In fact, their language can be so vague that one physician may interpret your wishes one way, while another would do the opposite! Look what happens when Christian churches do not have an authoritative interpreter of the Bible - many different ideas and many splintered Christian groups!

The 2013 Indiana POST Law and Form

In 2013, the Indiana legislature passed a POST law, and the Indiana Catholic Conference did not remove its opposition to the law until a conscience clause was inserted to protect physicians from being forced to carry out acts they would consider unethical. The form generated from this law (<http://www.in.gov/isdh/25880.htm>) will be presented to you when you are hospitalized in our state *and* have an illness that may soon lead to death. You are not required to fill it out.

The Indiana POST form presents as morally neutral the choice to refuse “artificially administered nutrition”; this means that you can choose to starve yourself to death if you cannot receive food and fluid by mouth. This is a form of euthanasia since it omits something (food and water) which will lead to death. Blessed Pope John Paul II stated on March 20, 2004 that the “administration of water and food, even when provided by artificial means. . is morally obligatory”.

Summary of Problems

Living wills have their origin in the euthanasia movement as a step to achieving societal acceptance of euthanasia, they are too vague to be helpful in the complicated course of medical care, and they do not include a trusted, living interpreter.

For more information and a fill-in-the-blank Indiana Catholic Health Care Directive that includes both key principles of moral health care *and* a place to designate health care representatives, go to www.indianacc.org – click ‘resources’ on the left – open the first document under ‘Health Care’.

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