

Assisted Suicide Tourism: Wish Fulfillment?



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“If life is not worth the trouble of being lived, everything becomes a pretext to rid ourselves of it.”

E. Durkheim (1951) Suicide

Ripped from the headlines

Print Story: UK doctor admits he helped patients die - Yahoo! News - Windows Internet Explorer

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UK doctor admits he helped patients die **AP** Associated Press

By RAPHAEL G. SATTER, Associated Press Writer
Sat Jun 19, 7:20 pm ET

LONDON – A British doctor who admitted shortening the lives of nearly 20 patients — including his own son — may yet face charges, British investigators said Saturday.

Howard Martin, 75, was cleared in 2005 of murdering three patients with fatal doses of pain killer. But he has since had his license revoked and now a dramatic confession to a national newspaper has prompted police and prosecutors to consider reopening the case against him.


Martin, whose videotaped confession was carried Saturday by the Daily Telegraph newspaper, said he had no regrets, claiming he acted out of "Christian compassion" to end the suffering of pain-stricken patients.

"My conscience is clear, I don't have anything to fear," he said in an interview from his home. Describing his decision to end the life of his son, Paul, who was suffering from cancer before his death in May 1988, he said: "What more could I do for him other than make sure he had dignity?"

But Britain's General Medical Council differed, calling Martin's behavior "completely unacceptable" and saying that in some cases there was no proof the patients were suffering.

And while many of the 18 patients he injected had only days to live, at least one patient — 74-year-old Harry Gittins — could have recovered from esophageal cancer had Martin not administered 200 milligrams of diamorphine the day before he died.

Martin then lied to the family, telling them that Gittins' cancer had spread, the council ruled.



Agenda

- ◉ Assisted Suicide Tourism (AST)
 - > Other types of Death Tourism
- ◉ AST as Wish Fulfillment?
- ◉ Continuum of Medical Tourism Activities
- ◉ Dignitas- Previous Research
 - > History
 - > Procedures
 - > Statistics
 - > Comparison
 - > Durkheim
 - > 2001-2004 Dignitas data
 - > Comparison with suicide data from Europe/America
- ◉ Ethical Issues
- ◉ Summary/Conclusions

Assisted Suicide Tourism (AST)

◉ Definition

> Also called:

- Death Tourism
- Suicide Tourism
- Doctor-Assisted Suicide Tourism

◉ Other types of Death Tourism

- ### > Travel to other locations for the purpose of death or suicide
- Vacation Death
 - Travel Suicide
 - New York Buildings
 - Hawaiian Volcanoes

Video

- ◉ [Joe vs. the Volcano](#)

AST as Wish Fulfillment?

- ◎ Wish Fulfillment
 - > Definition- Psychoanalytical Theory
 - > Hendrick, I. : Suicide as wish fulfillment.
Psychiatric Quarterly, 14: 30-42, January, 1940
- ◎ How this relates to other Medical Tourism activities
 - > Dental
 - > Cosmetic
 - > Health Tourism (Longevity or Anti-Aging)
 - > Reproductive or Surrogacy Tourism

A Continuum Of Medical Tourism Activities

○ From Birth to Death

Ancestry Tourism

Reproductive Tourism

Abortion Tourism

Surrogacy Tourism

Adoption Tourism

Volunteer Tourism

Spa Tourism

Health/Wellness Tourism

Sex Tourism (Prostitution)

Cosmetic Surgery Tourism

Medical/Dental Tourism

Transplant Tourism

Serial Killer Tourism

Retirement Tourism

Travel Suicide

Death Tourism (AST/Suicide)

Dignitas- History

- Located: Zurich, Switzerland
- Founder: Ludwig Minelli in 1998
- Motto: “To live with dignity, to die with dignity”
- Law: Article 115 of Penal Code
- Drug: Sodium pentobarbital
- Membership: 6,000
- Cost: \$10,500 USD
- Number: 1,046 at end of 2009

Video

- ◉ [Dignitas- Craig Ewert](#)
- ◉ The Suicide Tourist, Frontline, PBS, Airdate: March 2, 2010, Directed by John Zaritsky

Dignitas- Procedures

Dignitas Procedures:

- ◉ Age 18+ to join
- ◉ Initial contact- Dignitas replies
- ◉ Application goes back to Dignitas

Requirements:

- ◉ Personal resume & statement
- ◉ Medical reports
 - > Diagnosis
 - > State of Health
 - > Prognosis
 - > Treatment
 - > Current medication

Dignitas- Procedures (cont.)

Requirements (continued):

- ① Two physicians review, give “green light”
- ① Date set, bring documents
 - > Passport
 - > Proof of residence
 - > Birth certificate
 - > Partner's birth certificate
 - > Marriage certificate
 - > Divorce certificate
 - > Data sheet for Swiss government
- ① Travel to Zurich
 - > Two meetings with physician
 - > Dignitas apartment
 - > Meet the volunteer
 - > Sign documents
 - > Drink anti-emetic solution
 - > Drink sodium pentobarbital
- ① Swiss authorities arrive
 - > Police
 - > Prosecutor's office
 - > Physician
- ① Arrangements for the body
 - > Body returned home
 - > Cremated

Dignitas- Statistics

Data from Institute of Legal Medicine, University of Zurich, N=274 (2001-2004):

- ◉ Sex: 64% female
- ◉ Age: 84% ages 45 – 84
- ◉ Average Age: 64.5
- ◉ Marital Status: 41 % married
- ◉ Origin: 91% non-Swiss residents
- ◉ Diagnosis: 37% malignancy
- ◉ 31% neurological disease
- ◉ Type of Diagnosis: 79% fatal illness
- ◉ Duration of Membership: 88% < 1 year
- ◉ Place of Death: 95% Dignitas apartment
- ◉ Prescribing Physician: 93% Dignitas M.D.
- ◉ Mode of Administration: 91% oral

(S. Fischer et.al, "Suicide assisted by two Swiss right-to-die organizations." Journal of Medical Ethics 2008; 34:810-814.)

Dignitas- Comparison

Emile Durkheim, Suicide (1897/1951)

Higher Rates

Men

Older

Urban

Soldiers

Protestants

Single

Childless couples

Lower Rates

Women

Younger

Rural

Civilians

Catholics

Married

Families

Dignitas- Durkheim

Emile Durkheim, Suicide (1897/1951)

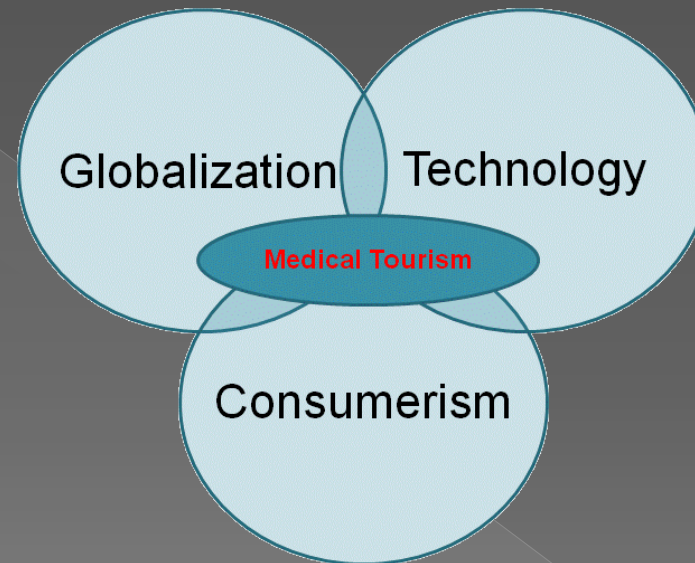
Four Types of Suicide

Integration	Low	<u>Egoistic Suicide</u>
	High	<u>Altruistic Suicide</u>
Regulation	Low	<u>Anomic Suicide</u>
	High	<u>Fatalistic Suicide</u>

(George Ritzer, *Sociological Theory*, 8th edition, New York: McGraw Hill, 2011)

Ethical Issues

- Technology/Globalization makes these opportunities more available



- Definition of:
 - > Terminal Disease
 - > Mental Health
- Social support- availability and decisions
- Legal and regulatory concerns
- Just because we can... should we?

Summary/Conclusion

- Based on the research...
 - > Medical Tourism as wish fulfillment
 - In a study of over 1,600 potential American medical travelers (5 point scale) by the CMTR-
 - The use of medical tourism services will allow me to achieve more:
 - Freedom to act (2.41)
 - Knowledge (2.37)
 - Comfort in my life (2.30)
 - What does this ultimately mean?
- Future trends
 - > Legal/regulatory environment
- Policy suggestions?

Questions?

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“...whatever the rational grounds for escape from life may be, and however pleasant the wishes represented by a mere phantasy of suicide, how is it that the drive to accomplish it can actually supersede the primitive instinct of self perseveration?”

I. Hendrick (1940) Suicide as Wish Fulfillment