## John Ashcroft and The Tricky Politics of Death

## By Rabbi Daniel Brenner

While the nation was transfixed by military spelunking in Tora Bora during this past month, Attorney General John Ashcroft made an attempt to unplug the Oregon assisted suicide law. Placing a block on controlled substances used to administer a lethal dosage, Ashcroft exercised his power over DEA policy to end the state's pioneering decision to allow such suicides. But a few days after Ashcroft's statement a federal judge blocked his move, and this has now set up an ethical and legal debate with broad ramifications for the future. Should our strongest drugs be used to end life painlessly for those who choose to take them? Or should life be protected against the wishes of the suffering?

Worried about the dangers of possible misuse of physician assisted suicide, the American Medical Association has emphatically supported Ashcroft's decision. Vital to the AMA's decision was the argument that Ashcroft's ban does not "hamper the physician's ability to aggressively relieve patient pain."

Yet, according to a recent report to the AMA, eighty percent of physicians rate their training in pain management as fair to poor. The result of having doctors who are under-trained in pain management is that many patients, in Oregon and elsewhere, are now living in unbearable pain that begs for extreme relief.

I learned this ten years ago when I began my rabbinic career working as a chaplain in a geriatric center. There I saw firsthand the needless suffering of the bedridden. I heard a thousand times "Rabbi, I want to die, already!" and saw many patients who had outlived all their family and friends, and were left alone to wallow in their physical ruin.

But could I ask a doctor to deliver a fatal final dosage? As a student of history, I am deeply disturbed by the idea of physician assisted suicide. During the Nuremberg War Crimes Trials, German doctors were called to testify on the "useless eaters," the term they had given to elderly and frail patients whom they had murdered. The chief counsel, Leo Alexander, argued that the Nazi idea that there was "life not worthy to be lived" had paved the way for the mass slaughter that followed.

In the last few months, as I've been doing research for a book addressing the spiritual and ethical issues of palliative care, I've grappled with the complexity of moral questions related to medical care of the seriously ill. Palliative care, defined by the World Health Organization as the active total care of patients

whose diseases are not responsive to curative treatment, depends on aggressive control of pain. There is overwhelming evidence that millions who suffer the advanced stages of incurable disease are not given the pain medicine that they need. Dr. Howard Heit, a Georgetown University expert on pain, estimates that between 50 to 70 million people fall into this category.

For that reason, the AMA position on assisted suicide needs to be amplified. Doctors in America do not need to be trained in how to kill; they need to be trained in how to aggressively treat pain. And while we are scrutinizing doctors who offer assisted suicide, we should protect the doctors who use sound methods to allow a slow, natural, painless death. Ultimately, the Oregon law should be blocked not only because of potential abuses in Oregon, but because its practice sends a message that the only real treatment for pain is a lethal overdose of barbiturates.

But while I support Ashcroft's position on the Oregon law, it is worrisome. A loaded White House statement preceded it: "The president believes we must value life and protect the sanctity of life at all stages."

What does the White House mean by "life at all stages"? While in the past the stage inferred was the fetus, lately "all stages" has become a code word for a much earlier form of life -- stem cells. Yet stem cell research, which is being hampered by the current administration, is our greatest hope for preventing the cases that degenerate our loved ones' lives into desperate pleas for a quick death. According to the American Association for the Advancement of Science, stem cell research offers potential breakthroughs for those suffering from cancer, Parkinson's and Alzheimer's. It is a tragedy that we are not pursuing this research with our full capacities.

As a result of the lack of support for stem cell research, we have stumbled into a great irony – an administration that protects the life of the hopelessly debilitated, but does not fund the research that will prevent them from getting to suicidal states in the first place.