

To The Council of Europe,
Parliamentary Assembly
Social, Health and Family Affairs Committee.
Strasbourg.
France.

As Christian physicians we met November 26th in Stockholm to clarify how alternatives to euthanasia and physician assisted suicide look like now and in the future in the Swedish hospice care/palliative care.

We support the ethical principles that the World Medical Association council proposed May 2003 : Ethics and Law:

“1. Ethical values and legal principles are usually closely related, but **ethical obligations typically exceed legal duties**. In some cases, the law mandates unethical conduct. The fact that a physician has complied with the law does not necessarily mean that the physician acted ethically.

2. When the law is in conflict with medical Ethics, **physicians should work to change the law**. In circumstances of such conflict, **ethical responsibilities supercede legal obligations.**”

a) We protest against the Marty report and the pressure it lays on physicians to act against their conviction and to act according to the Geneva Convention,” to preserve the utmost respect for human life from its beginning even under threat and I will not use my medical knowledge contrary to the laws of humanity”. We see a risk that the medical profession cannot be exercised by physicians, who will not accept to perform euthanasia or physician assisted suicide, and we protest that colleagues can become excluded from the profession from these reasons.

b) We demand that in all laws concerning medical ethical matters physicians and nurses are guaranteed the right to abstain from actions in conflict with their religious faith and moral convictions.

c) Recent medical research has shown that colleagues with poor education and practice in the medical area “palliative medicine” and colleagues “overburdened” = burnt out are the ones seen to consider Euthanasia and Physician Assisted Suicide in difficult clinical situations.(Moriata et al. Attitudes to sedation in palliative care. J. of Clin.Oncology, Vol 20, No3, 2002; pp 758-764 and BMJ 2003; 327 Peretti et al. Physicians attitudes to euthanasia: 595-596). We demand that the European countries act to permit physicians to get optimal education in palliative medicine during basic medical training and during vocational training and that a specialty in palliative medicine be available in all European countries, the way it is in the UK.

d) The role of the medical profession must never be to kill the patients. The very weak at the end of life need to be secured optimal palliative care in a loving environment without being forced to feel to become a burden to relatives and society. Society has the responsibility to secure these care facilities.

e) Physicians must take their own responsibilities: Not to persevere in treatment which cannot cure but only prolong dying, and abstain from carrying out euthanasia or physician assisted suicide of the weak and dying persons.

f) We protest against colleagues being used to solve a problem that society has responsibility to solve: The isolation of the elderly and the need for good loving care at the end of life.

We urge the European Council to take a firm and persistent distance to Euthanasia and Physician Assisted Suicide.

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