

## **Jack Kevorkian: Man of Mercy or Doctor of Death?**

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### **Two Stories**

1. NANCY DESOTO, 55, of Lansing, Ill., noticed that her arms were sore about the time her legs began to drag in January 1995. A doctor told her it was just arthritis and prescribed an ointment. She sought a second opinion from another doctor, who said the same thing. Believing she'd had a stroke, DeSoto sought a third opinion from an internist near her Indiana summer home. Her family said he ran weekly tests for six months, \$40,000 worth, to conclude that DeSoto had a pinched nerve in her neck.

DeSoto remained skeptical as her physical condition continued to deteriorate. "Not knowing what was wrong was the worst part about it," said her eldest daughter, Rhonda Reitveld. Soon she could walk only with a cane. With her husband, Joe, she holed up in a library, reading books and trying to figure out what was wrong.

In November 1995, a specialist at Northwestern University confirmed the couple's theory of ALS. "She was so frustrated," said Reitveld. "How could they do so many tests and not know?" Reitveld remembers the physician at Northwestern telling her that doctors "generally conduct thousands of dollars worth of tests so they don't have to tell you you're going to die."

DeSoto wrote Kevorkian. She asked him to help her die after her youngest daughter, who was getting married in September, returned from her honeymoon. She died with his help on Oct. 17, 1996.

2. REBECCA BADGER, 39, of Goleta, Calif., was treated by two doctors for possible MS and received strong doses of morphine for pain relief from muscle spasms--a symptom of the disease. Yet an autopsy showed that Badger had no signs of MS or any other physical disease.

Her primary doctor now acknowledges that Badger, an alcoholic and drug addict, may have had psychological problems and faked her illness. In hindsight, "there was never any objective evidence for her complaints," said Dr. Johanna Meyer-Mitchell. Suspecting MS, she referred Badger in early 1988 to a neurologist who, after several tests, declared "probable MS" and prescribed Valium. Later, he and Meyer-Mitchell wrote letters saying Badger had MS.

Badger also continued to see Meyer-Mitchell, who prescribed the antidepressant Prozac and psychological counseling. Badger saw a therapist once. As Badger's complaints of pain escalated, Meyer-Mitchell prescribed liquid morphine in February 1995. She upped the dose in 1996, mailing the prescriptions to Badger's pharmacy when Badger moved to Goleta, several hours away. Kevorkian assisted her suicide in July 1996.

Badger's daughter, Misty Nichols, now wonders if her mother had an unresolved psychiatric problem. "At first I was so convinced that she had MS," Nichols said. "But now I think people who have a mental illness can manipulate people around them really good. Maybe that's what happened here." California police believe Badger's mother may have encouraged her to seek Kevorkian's help after assisting Badger in two failed suicide attempts.

## Important Distinctions

Assisted suicide

Euthanasia

Withholding or Withdrawing Treatment

## The Reasons

Of the 47 people whom Kevorkian had helped commit suicide by March 1997:

- 36 had expressed fear of becoming dependent on others
- 34 were in chronic or cancer pain
- At least 15 had been diagnosed with less than 6 months to live
- 13 had rejected any further medical treatment
- At least 10 had tried suicide before

## Kevorkian's Guidelines

1. Every assisted-suicide candidate should undergo extensive counseling with Kevorkian.
2. Every candidate for assisted suicide should be examined by a psychiatrist.
3. Patients who complain of chronic pain should be examined by a specialist in pain control.
4. Before agreeing to assist a suicide, the patient's medical records should be reviewed in detail.
5. Kevorkian will only help those suffering from afflictions that are incurable or cannot be treated without intolerable side effects.
6. Death should not take place sooner than 24 hours after a patient has made a final request.

## Why The Supreme Court Refused to Recognize a Right to Physician-Assisted Suicide (*Washington v. Glucksberg* and *Vacco v. Quill*, 26 June 1997)

- ◆ Assisted suicide has always been, and continues to be, illegal in the United States.
- ◆ The distinction between withholding or withdrawing lifesaving treatments and assisting suicide is valid and important, based on "fundamental legal principles of causation and intent."
- ◆ States have an "unqualified interest in the preservation of human life."
- ◆ States have an interest in protecting the integrity and ethics of the medical profession, and trust in the physician-patient relationship. Physicians are healers, not promoters of death.
- ◆ States have an interest in protecting vulnerable groups (e.g. the poor, elderly, and disabled) from abuse, neglect, and mistakes.
- ◆ Permitting assisted suicide may lead to voluntary and involuntary euthanasia, as it has in the Netherlands.

## Common Questions

1. Do we have the right to do with our bodies and our lives what we want?
2. Why does anyone have the ability to force me to suffer when I don't want to?
3. If all that lies before me is physical pain and decreasing ability to do things for myself, why should I go on living?