



NT Voluntary Euthanasia Society Inc

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Newsletter

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Bob Dent Memorial Day

Saturday, 22 September 2007 marked the 11th anniversary of the medically assisted death of Bob Dent under the world's first voluntary euthanasia legislation, the *Rights of the Terminally Ill Act (ROTI)*, passed by the Legislative Assembly of the Northern Territory. Members of the Voluntary Euthanasia Society of Queensland and Exit International gathered in Cottontree Park, Maroochydore, to remember Bob and the short-lived NT law.

Dr Philip Nitschke spoke of his part in making the law work. Marshall Perron, former Chief Minister of the NT and architect of ROTI spoke on the political history of the time. He also noted the horrific numbers and forms of suicide resorted to by the elderly who no longer have the choice of physician assisted dying.

Bob's medical fight against his cancer has been documented in his last letter, published in newspapers across Australia, so his widow, Judy, spoke about the alternative things he tried before he requested the right to use ROTI. Her talk is reproduced in full here.

“Thank you all for attending this commemoration of the 11th anniversary of the death of Bob Dent, the first legally sanctioned physician assisted death in the world, made possible because of the *Rights of the Terminally Ill Act (ROTI)* in the Northern Territory. This most compassionate piece of legislation was warmly welcomed by supporters of voluntary euthanasia but scorned by the Federal Members of Parliament. A private member's bill sponsored by Kevin Andrews but strongly supported by both John Howard and Kim Beazley was rushed through Federal Parliament with a token Senate Enquiry pretending to consult the public. The members of this Senate Committee came to Darwin in late January 1977. Despite the Wet Season weather, so many people turned up that the folding door shutting off the selected room had to be pushed back, more than doubling the allotted space. Then the front door had to be barred to prevent more people attending as the numbers already exceeded what the Fire Department considered safe. The Senate Committee did not want to hear about David Mills' experience with Janet, nor about mine with Bob. They did not want me to tell them that ROTI was not like the seat belt act, no one was obliged to choose euthanasia. And those opposed to ROTI were intent on fostering a lot of false ideas about what ROTI meant. Remote community Aboriginals were told that they would get 'a bad needle' if they went to Royal Darwin Hospital. Letters to the Editor were written by people who had obviously never read the legislation and had no idea how it worked. I, of course, countered with my own Letter to the Editor outlining the facts and telling people how to obtain their own copy of the legislation so that they would know the truth.

But before this happened, the legislation was available to be used. When Bob declared his wish, no, his intention, to use ROTI, we were in a bit of a quandary. Dr Nitschke would be the primary doctor but the legislation required the signature of a second doctor, experienced in the terminal illness of the person involved and practicing in the NT. Getting this signature would be a problem as many of the Territory's specialists had already put an ad in the paper declaring that they would have no part in implementing ROTI. We did get the necessary signature from one of Bob's surgeons, after he had seen the Four Corners program "Road to Nowhere" about Max Bell's terrible journey to Darwin hoping to use ROTI and back to Broken Hill, having failed to get the necessary signatures.

The third required signature was from a psychiatrist confirming that the patient did not have a treatable mental condition that could make him ask for euthanasia when he didn't really want that. The psychiatrist did not have to be from the NT so Professor John Ellard flew up from Sydney to assess Bob's mental capacity to make a rational request to be assisted to die. These safeguards were deliberately put in to the ROTI legislation to ensure that only those who really wanted to die could be assisted. No way was it possible to have Grandma bumped off to collect an early inheritance.

Conventional medicine had little to offer Bob in 1991 so he tried various alternatives. He learned to meditate and became a Buddhist, a practice that gave him much peace. He went to a Chinese herbalist doctor and took his potions. He changed to a macrobiotic diet. He went to a holistic dentist in Adelaide and had all his mercury-containing fillings replaced. He went to a naturopath in Perth for magnetic therapy and purchased a machine which he used at home. He flew to the Gold Coast to see a doctor who specialised in intensive vitamin therapy and changed his diet again. One of his Darwin doctors said she would continue the vitamin therapy but she had no pole needed to hang the required IV bag. So Bob made his own collapsible pole to take to her rooms. He grew a mini plantation of pawpaw trees in the backyard to have a ready supply of leaves and flowers to brew up pawpaw medicine according to an Aboriginal recipe. We drank litres of the foul-tasting green concoction. And Bob flew to Perth again for microwave therapy. Each of these techniques has cured others but Bob was not cured. His cancer was already in an advanced state when it was detected but he did keep it at bay for nearly five years.

When ROTI was passed in the NT Legislative Assembly in 1995, Bob was pleased, but he was still reasonably well then. By the time ROTI became usable in July 1996, Bob's system had begun shutting down. In August, he completed the paperwork, no mean feat! By September, death was imminent and inevitable, there was no harm in hurrying it along. The Dalai Lama happened to be visiting Australia when Bob died. A reporter asked if Buddhism considered suicide to be a sin. The Dalai Lama replied "Oh, yes, but if you are old and sick and already dying, it is a very tiny sin."

Bob was grateful that he was in the right place at the right time to be able to commit the 'tiny sin'. As he said in his last letter "What right has anyone, because of his own religious faith to which I don't subscribe, to demand that I behave according to his rules and endure unnecessary intractable pain until some doctor in his omniscience decides that I have had enough and increases the morphine until I die? If you disagree with VE, then don't use it but don't deny me the right to use it if I want to."

Bob was fortunate that he was able to have that choice. The legislation was not perfect, but it worked. Sadly, only four people were able to use ROTI before the passage of Kevin Andrews' Euthanasia Laws Bill took away that choice. John Howard intervened in the Territory then because he could. (He's still doing it.) Had ROTI been passed by a State government instead of the Territory Government, the subsequent history would have been quite different. Please continue to lobby your State MPs. Maybe one of them will have the courage of Marshall Perron and propose his own ROTI. And maybe a State government will have the courage shown by Bob Dent and Philip Nitschke and PASS such a ROTI – after all, 80% of the people surveyed in a recent poll conducted for Dying with Dignity Victoria supported such legislation. Keep insisting that MPs elected to represent you, truly do represent you! DON'T GIVE UP THE FIGHT!"

The final speaker was Elaine Arch-Rowe who introduced her recently published book *I Bequeath the Python*, developed to provide a single resource for end-of-life planning, from advanced health directives information to funeral arrangements.

A number of people stayed on for a picnic lunch in the park before going on to a workshop conducted by Exit International.

Thanks go to Alastair, June, Henry, Joan and others from the Sunshine Coast Branch of VESQ for all the work they do to arrange the Bob Dent Memorial Day meetings.

Federal Election Campaign

Dr Philip Nitschke's campaign against Kevin Andrews in the seat of Menzies (Victoria) is moving along. If you can't be in Menzies to help but would like to contribute, please call the campaign manager, Lindy Boyd on 03 9850 8192.

Right to Die Petition in Victoria

A petition with over eight thousand signatures has been presented to the Victorian Parliament by the Deputy Premier. The Petition, one of the largest ever received, was organised by Dying With Dignity Victoria and draws to the attention of the House that under current legislation, Victorians do not have the right to choose to die with dignity when suffering a terminal or incurable illness with profound suffering. The petition requests that the Legislative Assembly of Victoria enact this right into legislation with appropriate safeguards.

The petition comes a month after a rally on the steps of Parliament House by supporters of the petition. The rally commemorated the second anniversary of the death (still under police investigation) of Steve Guest, a journalist and former media advisor to the Cain Labor Government. At the rally, Dr. Rodney Syme, vice president of Dying With Dignity said that he provided Steve with medication and challenged the Parliament to enact appropriate legislation that more than 80% of Victorians want.

Whatever happened to compassion?

In the article on Dr Mohamed Khadra and his book *Making the Cut: A Surgeon's Stories of Life on the Edge*, Mark Whittaker quotes Dr Khadra as saying: "Compassion as an entity seems to have been lost from the health system."

He then goes on to say: "Khadra had also watched his mother die slowly, and he watched so many other old folk desperately resuscitated, plugged into machines, so they could suffer some more before their inevitable deaths. Everything was geared to saving lives with no regard for consequences."

"A figure he comes back to constantly is that 70 percent of the health budget is spent on people in the last six months of their lives."

He quotes Dr Khadra again: "Why do we have so many people waiting years for hernia operations when we are spending an enormous amount of technological power on people in the last 30 days of their life? What are we gaining from all that? I don't have the answers but society needs to talk about it so the health professionals get some guidance."

Dr Khadra was the inaugural chair of surgery at the Australian National University, pro-vice chancellor at the University of Canberra and professor of surgery and head of the school of rural health at the University of NSW.

From The Weekend Australian Magazine, 25-26 August 2007

Special General Meeting and Annual General Meeting 2008

Under the *Associations Act 2003*, we are required to have a Special General Meeting in order to make changes to the constitution. To inconvenience everyone as little as possible, the SGM will be held immediately before the AGM, starting at 10am on 9 August 2008. The proposal is to alter the quorum required for a meeting to be valid from 8 to 5. It is vitally important that sufficient people show up for this meeting. Please mark it in your diary NOW. The entire meeting would be less than one hour. A reminder will appear in the April newsletter and a notice will be sent out 21 days ahead of the meeting. We have only one meeting a year. Please come.

NTVES appreciates being able to use the conference room in the office of the Member for Arnhem, Malarndirri McCarthy, for our annual general meeting.