

How can I achieve a “Dignified Death?”

Many people fear a “loss of dignity” and have somehow been convinced that the best means by which they can achieve a “dignified death” is to be killed by a physician. We do not believe that there is any dignity in allowing ourselves to be killed. The following is a better definition of “death with dignity”:

“The dignity of human beings is derived from inherent worth, not worth ‘for something’. Dignity is, therefore, an endowment that is largely reflected and conveyed in an attitude of respect and tenderness shown by others. Although the process of an illness and decline may significantly change people, it can never remove their dignity unless others allow it to do so. Such dignity can be seen in the forbearance, humor, and grace with which people deal with their suffering, and in the tenderness with which others care for them.”

Dr. Elizabeth Latimer, Ontario Medical Review, February 1992

We realize that it is never easy to watch a person die, but it is important to note that through this experience we have the tremendous potential of either affirming or robbing a person of their dignity by the degree to which we accept and care for them through this difficult time.

The solution...

A positive and compassionate response to a dying patient’s needs can be found in good palliative care. Palliative care affirms life while recognizing that death is part of living. Palliative care does not seek to lengthen or shorten a patient’s last days but to make them as rewarding and pain free as possible. The emphasis is on comfort rather than cure. The patient has a say in all decisions about treatments and almost all pain can be relieved to allow patients to die with true human dignity.

If there is a “right to die,” it surely should be the right to die naturally rather than to be subjected to a lethal injection, a form of capital punishment, for failing to die sooner.

For more information, contact



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CARE
at the end of
LIFE





I don't want to be a "burden" on society

In a truly caring society, those who become dependent need not perceive themselves as having a "duty to die". Pity, compassion and mercy must never be regarded as a justification for killing others. Euthanasia and assisted suicide are killing, not healthcare.

"Watching our loved ones grow old is one of life's lessons. We need to learn how to die, you know, just as we need to learn how to meet every other challenge we face in life."

We learn that, as we do almost everything else, from our elders...

I would not have traded the time I spent looking after my elderly mother for any other time in my life. She was my mother. I loved her dearly. And, just as she taught me about the beginning of life, she taught me too about the end of life. Why would I willfully cheat my children of such a lesson?"

Rita Marker
International Anti-Euthanasia Taskforce

Can pain be effectively controlled?

Specialists assure us that most pain can be controlled through the appropriate use of opiates and narcotics. If you know someone who has recently died in uncontrolled pain, the reason is not the unavailability of adequate pain relief but, rather, is due to ignorance and/or fear of addiction within the medical profession. The long-term solution is to place more emphasis on teaching effective pain control to all health care providers. For now, if you or someone you know faces uncontrolled pain, change doctors immediately. Efforts should be made to increase availability to hospice and palliative care for Canadians. Sadly, estimates show that only 30% of us who need it, have access to quality palliative care. Our commitment must be to provide pain relief and care to patients, not euthanasia and assisted suicide.

Must I submit to invasive or unwanted medical treatment?

Unfortunately it is not well understood by the general public that patients have the common law right to refuse any medical treatment. In fact, the average person is unaware that a doctor who treats a patient against his or her expressed wishes can be charged with assault. We already have personal autonomy with regard to medical treatment.

There is no law, medical group, church or anti-euthanasia organization which insists on unnecessary, useless, heroic or unduly burdensome measures to keep a dying person alive.

