CSPCP Position Statement:
The Practice of Euthanasia and Assisted Suicide

Who we are

The Canadian Society of Palliative Care Physicians (CSPCP) was formed with the vision of promoting the highest quality of palliative and end-of-life care by physicians in Canada. The Society strives to advance the quality of life of Canadians and their families who are living with a life-threatening illness, by advancing the field of Palliative Medicine and representing our discipline at local, provincial, and national levels. Members include medical practitioners with an interest or specialized practice in Palliative Medicine.

Definitions

Assisted Suicide - “The act of helping someone commit suicide by providing the means or the information on how to proceed, or both.”

Euthanasia - “An act that consists of deliberately causing the death of another person to put an end to that person’s suffering.”

Palliative Care is defined by the World Health Organization as an approach that improves the quality of life of patients and their families facing challenges associated with life-threatening illness, through the prevention and relief of suffering by means of early identification and impeccable assessment and treatment of pain and other physical, psychological and spiritual problems. Palliative Care:

- Provides relief from pain and other distressing symptoms;
- Affirms life and regards dying as a normal process, and intends neither to hasten nor postpone death;
- Integrates psychological and spiritual aspects of patient care, offering a support system to help patients live as actively as possible, and to help the family cope during the patient’s illness and in their own bereavement using a team approach;
- Enhances quality of life, and may also positively influence the course of illness and is applicable early in illness, in conjunction with other therapies intended to prolong life, and includes investigations needed to better understand and manage distressing clinical complications.

Palliative Medicine is the study and management of patients with active, progressive, advanced disease for whom the prognosis is limited and the focus of care is quality of life. Palliative medicine does not include the practice of euthanasia and assisted suicide.

Statement

Based upon a membership survey, the Canadian Society of Palliative Care Physicians strongly opposes the legalization of euthanasia and assisted suicide at this time, and most CSPCP members will not participate in euthanasia or assisted suicide.

Any questions about the survey or the CSPCP should be directed to Michelle Veer: michelle.veer@fraserhealth.ca