

1. Wikipedia, *Rodriguez v. British Columbia (AG)* (1993)

Sue Rodriguez was a 42-year-old mother whose illness amyotrophic lateral sclerosis (ALS or "Lou Gehrig's disease") was diagnosed in 1992. By 1993, it was found that she would not live more than a year, and so she began a crusade to strike down section 241(b) of the Criminal Code, which made assisted suicide illegal, to the extent it would be illegal for a terminally ill person to commit "physician-assisted" suicide.

She applied to the Supreme Court of British Columbia to have section 241(b) of Criminal Code struck down because it allegedly violated sections 7 (the right to "life, liberty, and security of the person), 12 (protection against "cruel and unusual punishment") and 15(1) of the Canadian Charter of Rights and Freedoms (equality).

2. Deutsche-Welle, *Belgium approves assisted suicide for minors*, Feb. 13 2014

<http://www.dw.de/belgium-approves-assisted-suicide-for-minors/a-17429423>

The vote on Thursday by Belgium's House of Representatives removed all age restrictions on the right of the incurably sick to end their lives, a vote that has caused considerable controversy.

3. Maria Cheng, *Belgium investigates doctors who euthanized 38-year-old woman with Asperger's syndrome*, National Post Nov. 27 '18 <https://nationalpost.com/news/world/belgium-investigates-doctors-who-euthanized-autistic-woman>

Belgian officials are investigating whether doctors improperly euthanized a woman with autism, the first criminal investigation in a euthanasia case since the practice was legalized in 2002.

Three doctors from East Flanders are being investigated on suspicion of having "poisoned" Tine Nys in 2010. The 38-year-old had been diagnosed with Asperger's syndrome, a mild form of autism, two months before she died in an apparently legal killing by a doctor.

Belgium is one of two countries, along with the Netherlands, where euthanasia of people for psychiatric reasons is allowed if they can prove they have "unbearable and untreatable" suffering. Among Belgians euthanized for mental health reasons, the most common conditions are depression, personality disorder and Asperger's. Many experts — in Belgium and beyond— dispute whether autism should be considered a valid reason to be killed.

Last year, the Associated Press reported that after Nys' family filed a criminal complaint, alleging numerous "irregularities" in her death, her doctors attempted to block the investigation.

"We must try to stop these people," wrote Dr. Lieve Thienpont, the psychiatrist who approved Nys' request to die — and one of the doctors now facing charges. "It is a seriously dysfunctional, wounded, traumatized family with very little empathy and respect for others," the message read.

4. Kelly Grant, *Assisted dying in religious facilities means tough choices for families*, Globe & Mail Jan 5 '18

That left Lola Hyman, the younger of Mr. Hyman's two daughters and his main caregiver, with a choice.

She could transfer her father to an unfamiliar clinic to die, or she could sneak Ellen Wiebe, one of the country's leading doctor-advocates of assisted dying, into her father's room to help him die in his own bed.

Lola and the rest of her immediate family settled on the latter. They would deal with the fallout later.

5. More extensive classes

- MAID <https://www.yutorah.org/lectures/lecture.cfm/830798>
- Effective Referral <https://www.yutorah.org/lectures/lecture.cfm/863308>

Biblical and Rabbinic Sources

6. Talmud, Ketuvot 33b

Had the Babylonians whipped Chananiah, Mishael and Azariah, they would have worshipped the idol.

7. Rabbi Eliezer Waldenberg (20th century Israel), Tzitz Eliezer 13:87

Whether the medical means are pills or injections, so long as they are given by a doctor with the goal of lessening his great suffering this is part of the Torah's permission to the physician to heal...

8. Rabbi Moses Maimonides (Rambam, 12th century Egypt), Laws of one who Wounds and Harms 5:1
One may not wound himself or any other person.

9. Lord Rabbi Immanuel Jakobovits (20th century England), HaRefuah v'haYahadut pg. 152

The value of human life is infinite, and therefore it cannot be divided – each portion of it is infinite. It then emerges that seventy years of life have the exact same value as thirty years, or one year, or one hour, or one second. This demanding definition of the sanctity of human life is founded not only on strict mathematics or logic; it is founded equally upon ethical considerations. If human life were to be diminished in value because its end was near, human life would lose entirely its absolute value, and receive relative value – relative to its life expectancy, health, benefit to society...

10. Talmud, Berachot 10a

Isaiah replied: It is because you have not been involved in procreation.

Hezekiah explained: I saw in a Divinely inspired vision that I would have bad children!

Isaiah replied: What business do you have in the secrets of the Merciful One? You should do as you are instructed, and Gd will do whatever pleases Gd.

11. Rabbi Yaakov Tzvi Mecklenberg (19th century Germany), HaKtav v'haKabbalah Noach 9:5

"From the hand of *adam* [and from the hand of *ish*, his brother]" – The Torah doubled the term *adam* and *ish*, and also joined the word "brother". Apparently, there are two forms of murder: Harming the victim by avenging one's self upon him, taking his property and the like, or benefiting the victim when he is immersed in great pain and he would choose death over life.

12. Talmud, Ketuvot 104a

Rebbe's maid ascended to the roof and said, "The Heavens request Rebbe and the earthly realm requests Rebbe. May it be Gd's will that the earthly realm should overpower the Heavens!"

When she saw how often Rebbe had to go to the washroom, removing his phylacteries and then putting them back on, and how he was in great pain, she said, "May it be Gd's will that the Heavens should overpower the earthly realm!"

The sages were not silent in their prayers for Gd's mercy, so she took a pitcher of water and threw it from the roof. The praying people paused, and Rebbe passed away.

13. Samuel I 31:3-4

And the war turned heavily against Saul, and the [enemy] archers found him, and he suffered greatly from the archers. And Saul said to his armour-bearer: Unsheathe your sword and stab me with it, lest these uncircumcised ones come, stab me and mock me! But his armour-bearer would not, for he was very afraid. And Saul took the sword and fell on it.

14. Talmud, Avodah Zarah 18a

They brought him and wrapped him in a Torah scroll, and bound him with vines and kindled them. They brought wool sponges and soaked them in water and placed them on his heart so that his life would not depart quickly... His students said to him... Open your mouth and let the fire enter! He said to them: Better that the One who gave it take it back, and not that I harm myself.

The executioner said to him: My master! If I were to increase the flame and remove the wool sponges from your heart, would you bring me to the next world? He replied: Yes. [The executioner said:] Swear to me! He swore.

15. Rabbeinu Asher (13th century Germany/Spain) Commentary to Moed Katan 3:94

Suicide was permitted for [King Saul], as seen in a midrash, "'But only, your blood for your lives I will seek; from your lives I will seek your blood.' I might say this even for one who is pursued, like Saul? For this reason it says 'But'." Therefore, he was not within the category of willful suicide.

16. Jane Parkis and R. Warwick Blood, *Suicide and the Media*, Crisis: The Journal of Crisis Intervention and Suicide Prevention <http://psycnet.apa.org/journals/cri/22/4/146/>

Reviews 42 studies concerning the relationship between nonfiction media reporting and portrayal of suicide and actual suicidal behavior and ideation. Studies of nonfiction newspaper, television, and book accounts of reported suicide were examined. Results show an association between nonfictional media portrayal of suicide and actual suicide. The association satisfied sufficiently the criteria of consistency, strength, temporality, specificity, and coherence for it to be deemed causal.

What does Jewish law instruct?

17. Rabbi J. David Bleich, *Treatment of the Terminally Ill*, Tradition 30:3 (1996), pg. 62

[E]very prudent effort should be made to alleviate the patient's suffering. This includes aggressive treatment of pain even to a degree which at present is not common in current medical practice. Physicians are reluctant to use morphine in high dosages because of the danger of depression of the cerebral center responsible for respiration. The effect of morphine administered in high doses is that the patient cannot control the muscles necessary for breathing. There is, however, no halakhic objection to providing such medication in order to control pain in the case of terminal patients even though palliation of pain may ultimately entail maintaining such a patient on a respirator. Similarly, there is no halakhic objection to the use of heroin in the control of pain in terminal patients. The danger of addiction under such circumstances is, of course, hardly a significant consideration. At present, the use of heroin is illegal even for medical purposes. Judaism affirms that everything in creation is designed for a purpose. Alleviation of otherwise intractable pain is a known beneficial use of heroin. Marijuana is effective in alleviating nausea that is a side-effect of some forms of chemotherapy. There is every reason to believe that these drugs were given to man for the specific purpose of controlling pain and discomfort. Jewish teaching would enthusiastically endorse legislation legalizing the use - with adequate accompanying safeguards - of those substances in treatment of terminal patients.

18. Rabbi Dr. Mordechai Halperin, <http://98.131.138.124/db/showQ.asp?ID=6936>

[Question:] I wish to receive counsel and guidance regarding my 91-year old mother, who has fractures all along her spine due to osteoporosis. Recently she fell and was bounced around, and since then she has experienced great pains.

The advice of the doctors is to sedate her, to prevent pain. According to the doctors she will not return to walking, or to moving her lower body. She can move her arms [only] lightly. However, she is still lucid. The question: May one go along with the doctor's advice and introduce her into sedation to prevent pain? I understand that this sedation would become a permanent state for the rest of her life.

Response: The discussion is of a lucid woman. Therefore, this depends exclusively upon her desire, and one should ask her directly.

19. Rabbi Moses ben Nachman (Ramban, 13th century Spain), Torat ha'Adam, Shaar haSakkanah

Since the Torah permits doctors to heal, and the Torah obligates him to do this, there is no concern [for medical error]. If he practices proper medical protocols with his own judgment, it is only a mitzvah; the Torah commanded him to heal, and he erred unwillingly.

20. Rabbi Eliezer Waldenberg (20th c. Israel), Tzitz Eliezer 10:25:6 citing Aruch haShulchan Yoreh Deah 339:1
And even though we see that he is in great pain in his death throes, we still may not act to hasten his death. The world and all of its contents are of Gd, and such is His will.

21. Rabbi Yaakov Kanaievsky (20th century Israel), Karyana d'Igrita 1:190

Regarding the basic principle that one must do everything possible to extend the life of a patient [even though it is only temporary life]: In truth, I also heard statements like this in my youth, but I don't know whether it comes from someone reliable. In my eyes, this requires great examination, for in Yoreh Deah 339 it is clear that one may remove an obstacle to the death of a patient [when that would also prevent great suffering]. One only may not act upon his body. If so, then I see no reason to prohibit sitting without acting [where acting would increase suffering]; just the opposite, one should learn from here to refrain from acting...

22. Rabbi Moshe Feinstein (20th century USA), Igrot Moshe Choshen Mishpat 2:73:1

In such people, where the doctors recognize that he cannot be healed and live, and that he will not live as a sick person without pain, but they can give him medicine which will extend his life as he is, with suffering, then one should not give him medicine, but leave them as they are.

23. Rabbi Moshe Feinstein (20th century USA), Igrot Moshe Choshen Mishpat 2:74:3

His honour asked whether one should distinguish between temporary life and on-going life regarding the obligation to heal, where it is not possible to heal him from suffering but only to extend his life in pain for as long as he lives. [He means to suggest] that there is no obligation to heal him when the healing will cause him to live in suffering during that brief time, but if he were healed for on-going life, as people today live, then one would be obligated to heal him. In truth, I never mentioned this distinction, and in truth, it is not logical to distinguish; using logic, one could also argue the opposite...

24. Rabbi Hershel Schachter (21st century USA), **ואליי הוא נושא את נפשו**, Beit Yitzchak 1986

Three distinct categories of cases emerge, as law:

- 1) Where there are clear grounds to believe that all people would want such treatment, then we say that his view is cancelled before that of all people, and we compel him, under [the mitzvah of] "You shall protect your lives."
- 2) Where there are grounds to believe that all people would not want such treatment, then we say that his view is cancelled before that of all people, and we may not torture him with treatment, even should he wish it.
- 3) And where there are no clear grounds supporting either side, then it depends on the view of the patient...