

the stakeholders - the UOW, and federal, state and local authorities - must stick tight. It's an opportunity that should not be missed under any circumstances.

## BORN TODAY

**October 13**  
**Paul Simon,**  
**American**  
**musician (1941 -)**

Regarded as one of the best songwriters of his generation. In 1964 formed Simon and Garfunkel with Art Garfunkel and they became the face of folk-rock. They split in 1970 and Simon embarked on an equally successful solo career.



## HISTORY

**1844** - Greenwich Mean Time introduced.

**1933** - Australia's first traffic lights installed in Sydney.

**1974** - Death of US TV personality Ed Sullivan.

**1988** - Egyptian author Naguib Mahfouz (pictured) becomes first Arabic-language writer to win Nobel Prize for literature.



THE issue of voluntary euthanasia continues to be fiercely contested. Opponents say that life is sacred and that legalising euthanasia would open the door to abuses including killing people without consent.

Proponents say that people should be able to voluntarily end their lives to avoid extreme suffering from pain, breathing problems and indignities.

There are several illusions and paradoxes in the debate.

Opponents usually assume that Australian law prevents euthanasia. But actually it goes on all the time.

There are two sorts of euthanasia in Australia today. The first is when doctors gradually increase doses of painkillers for terminally ill patients, often causing unconsciousness and leading to death within days. This is legal and is justified as relieving suffering despite the predictable consequence of death. This is sometimes called slow euthanasia.

There are also instances in which doctors actively help patients die quickly by providing suitable drugs or administering them personally. Roger Magnusson, now a professor at the

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Sydney University, documented this "euthanasia underground".

Because euthanasia is illegal, doctors seldom develop expertise and sometimes botch their covert efforts or act without proper consent. The paradox is that legalisation would eliminate much of this covert euthanasia and its associated problems.

Many people approaching death fear, most of all, that they will become totally incapacitated and unable to put an end to their own suffering. Rodney Syme, a Melbourne doctor, wrote a book, *A Good Death*, about his experiences in providing drugs so suffering patients could end their lives. His acts of compassion had a surprising effect.

By making death voluntary, their fear of suffering was greatly reduced.

Voluntary euthanasia is legal in the Netherlands, Belgium, Switzerland and three states in the US. In those parts of the world, only a tiny proportion of those who die avail themselves of formal euthanasia procedures.

Where euthanasia is legal, eligibility depends on satisfying stringent criteria. Doctors usually play a big role in the process.

There seems to be no evidence that legalisation has increased dangers to at-risk groups such as people with disabilities.

Dr Philip Nitschke, Australia's most prominent proponent of euthanasia, was disillusioned with

the prospects for legalisation following the Federal Parliament's overruling of the Northern Territory's euthanasia law in the 1990s. So Dr Nitschke set out to find ways for people to end their lives peacefully without having to involve anyone else - doctors or relatives.

Dr Nitschke and Dr Fiona Stewart's *The Peaceful Pill Handbook* describes many tools and techniques for achieving a peaceful death. The book is banned in Australia, but legal elsewhere. It is quite easy to obtain over the internet.

If legal euthanasia had been allowed to continue in the Northern Territory, Dr Nitschke might never have started his quest for do-it-yourself euthanasia.

Opponents of euthanasia are trying to stop Dr Nitschke and his organisation Exit International through censorship, which is actually generating greater publicity for Exit's approach.

Paradoxically, opponents of euthanasia are contributing to an expansion of means for people to make their own choices about when and how to die.

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