

***Final Exit*: euthanasia guide sells out**

A Hemlock Society book on suicide is leading the best-seller list in the 'how to' category, revealing widespread public concern about having control at the end of one's life.

CONTRARY to the admonition of the poet to rail against the dying of the light, most people have a deep desire to go gently into that good night when the time comes. If the medical profession needed proof of people's desire to have some control over their demise, it need only heed the fact that a slim book called *Final Exit* has hit the best-seller list in the United States where suicide is still taboo but fear of twilight life tethered to feeding tubes or respirators is widespread.

Written by Derek Humphry, a British journalist and euthanasia proponent, and president of the Hemlock Society, which has headquarters in the state of Oregon, *Final Exit* describes what the author calls the "practicalities of self-deliverance". In considerable detail, Humphry reviews a variety of options for suicide for the dying and presents a chart giving combinations and dosages of lethal drugs.

It is not surprising but nonetheless disappointing that *Final Exit* has come under attack by ethicists and others who piously fear that its prescriptions for suicide for the terminally ill will be abused by the merely downhearted. Thus newspaper accounts of the book quote 'experts' worried that it will get into the hands of the mentally ill without offering them the opportunity for what is now a favourite US pastime — 'counseling'. To worry about such things first suggests that despondent people cannot think up ways of committing suicide without the aid of a how-to guide and, second, indicates that the worriers have not read Humphry's book.

Final Exit is about release from the pain of terminal illness, not about the romance of suicide. There are no consumptive young maidens dying gracefully on Victorian couches. "Roughly half the people who die in Western society currently are connected to equipment", Humphry claims. In theory, they have the option of pulling the plug. The suicide guide is intended for the dying for whom there is no plug to pull, and only for those who have already decided that self-deliverance is ethically acceptable. "If you consider God the master of your fate, then read no further", Humphry says: but if you and your loved ones want to have control over the time of death, read on and plan ahead. Gentle suicide is not easy.

Shooting oneself in the head is not only violent and bloody, it is often not successful. Dying in a closed garage with the motor running takes long enough that

discovery is likely. Ingesting drugs on a full stomach leads to vomiting, not dying. And cyanide can lead to a painful end, as witnessed by the deaths from cyanide-laced Kool-Aid a few years ago in Jonestown.

The gentlest and surest exit for the terminally ill — often individuals too incapacitated to commit suicide unassisted — lies with help from the healing profession which, in the final analysis, is what the Hemlock Society is all about. The barbiturates Seconal and Nembutal are recommended for those who can still swallow. A variety of injectable drugs is offered for the comatose.

Final Exit is the first of several Hemlock Society books to be distributed by a commercial publisher — a small house called Carol Publishing in Secaucus, New Jersey. The tale of the book's success is the tale of public appetite for information on this hidden subject. Between April and mid-July, 2,000 copies out of a print run of 8,000 were sold. A story in the *Wall Street Journal* stimulated further publicity. In Washington, DC, bookstores have customers on waiting lists. Total sales of more than 100,000 are anticipated.

Euthanasia is a subject ripe for wide discussion in nations where physicians armed with the life-sustaining tools of modern science may be violating their pledge to 'first do no harm' in their zeal to ward off death. Among Western nations, only the Netherlands has an unambiguous policy that allows physicians to ease the passage of the dying. The doctor's role was highlighted recently when a physician in Rochester, New York, wrote a journal article describing how he assisted in the death of a leukaemia victim by prescribing lethal drugs for her to take when she was ready. That the physician was brought before a grand jury reveals the state of the law. That the grand jury refused to indict reveals something about the public's attitude. Unfortunately, it cannot yet be read as the voice of the majority.

But the realities of *Final Exit* can no longer be hidden. As the average age of the population increases, the abstract debates of ethicists about informed consent and of physicians about the duty to heal will come face to face with realities and indignities of incapacitating illness that in an earlier age would have claimed its victims swiftly. The 'ethic' of using technology to prolong life when life is ebbing should give way to the ethic of individual choice, including the right of physicians to choose to assist the dying. □