

# 787 gas leak alert

A BOEING 787 is out of action after a battery leaked gas – a year after the fleet was grounded by similar problems.

A mechanic saw white smoke below the cockpit of the parked aircraft. No one was on board Tuesday's Japan Airlines flight to Bangkok at Tokyo's Narita airport.

Boeing and Japan Airlines are investigating the latest incident.

## GLOW YOUR OWN

Scientists have grown plants that glow in the dark and could one day be used to light rooms – in St Louis, US.

ONLY IN SATURDAYS Sun

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# Forest is beached

THE remains of a 10,000-year-old forest were uncovered on a beach after storms washed away sand and pebble banks.

Archaeologists are trying to preserve fragile timbers at Newgate, West Wales. They were submerged as sea levels rose after the last ice age.

Phil Bennett, of Pembrokehire Coast National Park, said: "Without protection they'll go."

## BATTER THAT!

Chippy owner Corinne Clarkson, 39, is claiming a world record after cooking a 27-inch battered sausage at Preston, Lancs.

# POWERFUL VIEW OF ASSISTED DEATH BY SUN'S OWN GP

# I wish we doctors could end suffering ...like my mother's

- SUN DOC CAROL COOPER



PLEA... Dr Wilson

## SOAPS INFORM PUBLIC

EXCLUSIVE by YVONNE BOLOURI

TV dramas have a huge impact on the public's views on assisted suicide – and Dr Libby Wilson reckons they can help boost debate on the subject.

After our poll showed 73 per cent of people backed the bid by Corrie's Hayley Cropper to end her own life, Libby's Glasgow-based charity Friends At The End started receiving calls from people wanting more information.

Retired GP Libby, the charity's medical director, thinks soap plotlines can help inform people – and it's not just a recent trend.

She said: "Years ago Taggart's father committed suicide. He had been part of a group of elderly people who agreed to help each other die. And in Holby City, one of the surgeons took his wife to Dignitas."

BBC Scotland's soap River City also has an ongoing right to die story.

Libby said: "I'm all for it. The more people who discuss it the better."

## Suffering

The 87-year-old was arrested four years ago after a woman who wanted to end her own life contacted her.

Libby said: "She phoned me two or three days before she actually did it to make sure she'd got all the information correctly."

"She phoned a second time and police found my number on her records."

"I was arrested and on bail for 11 months before they decided not to prosecute."

"If they'd charged me and I had to go to court, everyone would have been talking about the right to assisted suicide, and that's not what they wanted at all."

Friends At The End has a dual purpose.

Libby said: "The first is to try and change the law to allow assisted dying legally, and the second is to provide information to people who feel that their lives are no longer tolerable."

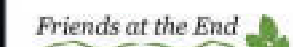
"We don't try to persuade or dissuade them."

"I had a lady on this morning who wanted information because she has a friend who is dying of lymphoma."

"She said she only wished she knew all this last year."

"Her husband had pancreatic cancer and kept begging her to help him to die because there was no relief from his suffering."

"If I ever found myself wanting assisted suicide, I would like to have the choice to end my life at home."



# POWERFUL VIEW

LIFE is complicated but dying is even more so.

As a doctor I have seen many patients whose lives are utter misery.

They have reached a stage where nothing in the vast medical armoury can relieve their suffering and make their days bearable.

Some of them beg for death. But killing someone is illegal and assisting a suicide carries a sentence of up to 14 years.

No medic is detached from this suffering.

As doctors, we are often deeply affected by seeing someone in this state and by witnessing their family's suffering as well.

If it were the beloved family pet with an untreatable condition, the answer would be clear and compassionate.

Withholding treatment is totally different from deliberate killing, whether or not it is with the patient's consent.

But there is what is called the doctrine of double effect.

This makes a distinction

between acting with the intention to kill and performing an act where death is an unintended effect.

For instance, large doses of painkillers can shorten someone's life. But doctors give them only with the intention of relieving pain.

The doctrine of double effect says that is morally right – even though the primary effect (pain relief) can only be bought at the risk of a harmful side-effect.

Sometimes that harm can even be foreseen but, according to the doctrine, it is still OK because it achieves the main benefit, which is relieving pain.

But the double effect isn't often the get-out clause it appears to be.

Nowadays, there is a huge range of pain-relieving drugs available and changes to the dose tend to be very small, so they rarely shorten life.

It is heart-breaking to have a relative who longs to die and I really feel for the families, especially as I'm facing a situation almost exactly like this with my own mother.

My mum's spine is deformed and broken from severe osteoporosis. She howls in pain and in anticipation of pain, before even being touched.

She is incapable of doing anything for herself now. Everything the devoted nurses do for her hurts acutely.

Sometimes she lies in bed yelling that she's in agony. Or she shouts over and over: "Please help me, please help me." She weighs five-and-a-half stone and stares with blank eyes. Everything that she has been through over the past two years – including a major op – has left its mark.

The pain is quite literally causing her mind to go but she is still aware of how bad things are.

I sit by her hospital bed and hold her hand and she says she wants to die.

By CAROL COOPER

Increasing the painkillers makes her more confused.

Some of the drugs made her paranoid. I'm still hoping there's an answer because it's so awful to watch her suffer.

Don't get me wrong. I was never immune to the suffering of unfortunate patients who found themselves in situations like these.

But only when it's your own family can you appreciate the back story and see the whole perspective of their lives.

I do so wish doctors could end this suffering.

Medicine has a lot to answer for. There are many people who would not be alive today had it not been for doctors.

On the other hand, medicine isn't a perfect science and it never will be.

I have been a doctor long enough to know at first-hand that medicine is good at prolonging life but not so good at sustaining its quality.

Doctors don't in fact pledge the Hippocratic Oath when they qualify but they do have instilled in them the principle of "beneficence" – what benefits the patient.

The Abortion Act of 1967 recognises this and places the life and health of the mother at a higher premium than that of her unborn child. It does, however, also allow abortion if there is a substantial risk that the child might be seriously handicapped.

In decisions around the end of life, the ethical dilemma is also what course of action is best for the patient.

It is hard to see how death can benefit a patient's interests. But if quality of life is appalling, or treatment is unbearable, then the balance of pros and cons may suggest that treatment does not benefit the patient. So it is not always in that patient's best interests to, say, treat a chest infection.

All the doctors are then doing is letting nature take its course. In making that decision to withhold treatment, the relatives' and patient's wishes are vital.

If the patient can't take part in the discussion, his or her previously stated wishes are taken into account.

Medicine has come so far now that we need an urgent way forward on that most basic event, death. Not all doctors are agreed on euthanasia. If it is introduced in any form, we would need strict safeguards to protect against abuse, greed, negligence and incompetence.

Some doctors are vehemently opposed to it. Others, like myself, fear that legalising assisted suicide could change the doctor-patient relationship forever.

Yet there is also the hope that it would help medics to honour Hippocrates' order: "To cure sometimes, to relieve often, to comfort always."

**'The pain is causing my mum's mind to go, but she is still aware of how bad things are for her'**

**1,701 people have ended their lives at Dignitas**

**British deaths at the Swiss clinic stand at 244**

**In 2002 there was one Brit death at the clinic. In 2013 that number was 29**

**WATCHING** the decline of a terminally ill loved one is a traumatic and harrowing experience.

Medical staff also share the desperation and helplessness felt by everyone involved as a life slowly slips away and a patient's needs increase.

In Day Three of The Sun's series on assisted suicide – which coincides with the Coronation Street story about dying Hayley Cropper – we reveal the latest statistics from right-to-die organisation Dignitas.

Their figures, out this week, show how many Brits booked a one-way ticket to its Swiss clinic to end their lives. Last year alone it was 29, although the highest number recorded was 33 in 2012.

Senior feature writer **KARA DOLMAN** visited the quiet town of Pfäffikon in the state of Zurich which is home to the Dignitas centre – a blue, corrugated-iron building, where each year hundreds of people, mostly the



QUIET... The Sun's Kara in Pfäffikon

terminally ill, come to die. In 2011 voters in Zurich overwhelmingly rejected a proposal to ban the hundreds of foreigners from visiting the clinic each year.

Kara found that the people of Pfäffikon, who number just over 11,000, view those arriving at the "dying centre" with sympathy.

For them, the business of death is just another part of life in the

German-speaking town. Deborah Wyss, 21, who works in a hotel bakery, told Kara: "When I'm working at the hotel I'll often see an old couple there and one will usually be sick or in a wheelchair. But the next day there is just one."

"Originally people were very upset about it, discussing whether or not the dying centre should be in Pfäffikon but it has calmed down. Some don't even know it's there."

Painter Mirkola La Salula, 33, added: "The people who do this are not monsters but if they make centres like this legal in England then you should build them somewhere isolated."

"It's not good to have it in the centre of town close to a football field where children play."

Also today, Sun Doctor Carol Cooper gives a moving account of her attitude to assisted suicide.

And Scots GP Libby Wilson, medical director of charity Friends At The End, explains why we need more discussion about the issue.

## HOW DIGNITAS WORKS

FIRST the person must register as a member of the Swiss assisted suicide organisation and forward copies of their medical records – along with a statement explaining why they consider their life to be unbearable.

If, following several doctor assessments, permission is given, that person is then filmed drinking a solution of lethal barbiturates in a glass of water to prove they acted alone. This is key because euthanasia is illegal in

Switzerland. Anyone unable to lift the glass themselves can press a button which allows a machine to administer it.

Most people take 30 minutes to peacefully pass away in one of the Dignitas building's two suites, often surrounded by friends and family.

Dignitas's current joining fee is £150, its current annual membership fee is £60 and its current total cost for an assisted suicide is £7,875.

**Most British Dignitas deaths occurred in 2012...there were 33**

**Germans make up the bulk of Dignitas deaths with 840**

**The total cost for an assisted suicide at Dignitas is £7,875**

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EXCLUSIVE SUN POLL

**LET OUR SICK DIE LIKE HAYLEY**

72% back Carrie's choice

SUPPORT... Sun poll