Assisted Suicide Q & A

Q: What is the view of the medical profession?

A: The American Medical Association holds that “physician-assisted suicide is fundamentally incompatible with the physician's role as healer.” The AMA, along with the American Nurses Association, American Psychiatric Association and dozens of other medical groups, urged the Supreme Court in 1997 to uphold laws against assisted suicide, arguing that the power to assist in taking patients’ lives is “a power that most health care professionals do not want and could not control.”

Q: What does the Catholic Church teach?

A: Our moral tradition holds that human life is the most basic gift from a loving God -- a gift over which we have stewardship, not absolute dominion. As responsible stewards of life, we must never directly intend to cause our own death or that of anyone else. Euthanasia and assisted suicide are always gravely wrong.

Q: What about related issues, such as withdrawal of life-sustaining treatment?

A: Careful stewardship of life does not demand that we always use every possible means to prolong life. Treatment can be refused by a terminally ill patient when its burdens outweigh its benefits for that patient. In such cases, the basic care owed to every human being should still be provided. We may reject particular treatments because the treatments are too burdensome; we must never destroy a human life on the ground that it is a burden.

Q: How is the practice of giving dying patients pain medication different from assisted suicide?

A: The intent of modern pain management is to control patients’ pain, not to kill the patient. Rarely is there any risk that pain medication will shorten a patient’s life by suppressing respiration, even as a side-effect, because patients regularly receiving morphine for pain control quickly develop a resistance to this effect. With modern pain control methods, physical suffering can be brought under control for all dying patients, almost always without resorting to terminal sedation. As Pope John Paul II has said, pain management and other supportive care is “the way of love and true mercy” that we should offer to all dying patients, instead of offering to assist their suicides.

Excerpts from USCCB Factsheet