Letters

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Assisted dying

David Jewell uses his position as Editor of the *BJGP* to provide us with his personal views on assisted suicide in the November issue;[1] but I feel that some of his comments must not go unremarked upon.

He correctly notes that GPs 'remain an important presence in palliative care', thus our collective opinions must make a valuable contribution to the debate. Yet we are but members of wider society, and it is that wider society which will decide where it wants to travel with this. The idea that we have a 'belief that if we oppose any change strongly enough our view will prevail' must be nonsense: goodness! How much have governments changed the ways we work or the things we do very much against our collective will.

But I'm seeking common ground here, and we both share the view that GPs can make a valuable contribution. It is exactly that desire to seek common ground that leads to a situation where 'most of the arguments are not about principle ... but about the consequences or practicalities'. There are of course opinions that arise from a more spiritual point of view, and each faith group will represent their own perspective, as will humanists, secularists, and aetheists. But it is striking that an organisation such as Care Not Killing can bring together an otherwise diverse group of disability and human rights organisations, healthcare and palliative care groups, and faith-based organisations to make sure that objections to physician-assisted suicide are made clear.[2] From where I stand, our society seems to be becoming increasingly secularised; it talks about tolerance and respect, yet any other firm faith-based viewpoint seems to be becoming less and less tolerated (almost to the point where, professionally, you are not allowed to talk about it at all). Jewell represents one clear strand of thought but there is in fact a large and very broad based support for an alternative, and they approach it through their common ground.

Our country, our society, is unique still, even though we are part of a wider global society that is in many ways becoming more uniform. I don't believe that we show 'an insular unwillingness to learn from experiences elsewhere'; rather, our own attitudes and opinions should be, and are, informed by those experiences; but that does not mean that we should necessarily always take the same route as other countries (and in many other societal or political aspects there is widespread support for remaining out of step with much of Europe, for example).

Contemporary societal attitudes do indeed seem to have 'elevated patient autonomy to the point where it outweighs almost every other ethical principle', but I actually think that is very wrong. We are a society, bound together inextricably, not simply a very large bunch of individuals. We do each have rights but, to me, fundamentally more important are our duties and responsibilities to each other, and each of us needs to consider these before any of us demand our rights.

Finally, while I can find some common ground with Jewell and disagree with his conclusions, I absolutely refute that in the 'messiness and unpredictability of life' we should 'abandon our commitment' to patients in any way. I intend to travel that path with my patients until death indeed parts us in this world, doing my best to relieve suffering. Actually, the really hard part for everyone is coping with the very fact that life is messy and unpredictable, and accepting that as humans we are not Gods.

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REFERENCES

1. Jewell D. Our debt to those who are dying. *Br J Gen Pract* 2009; **59(568):** 809–810.
2. Care not killing. http://www.carenotkilling.org.uk (accessed 9 Nov 2009).

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Assisted dying

I was surprised, shocked, and saddened to read your personal opinions of assisted dying expressed in an editorial in the November issue of the Journal.[1] If you do insist on giving your own personal views on such a controversial issue, please be gracious enough to allow others to give an alternative view particularly when, as you acknowledge, your view is in the minority. Preferably dear Editor, kindly stick to editing.

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REFERENCE

1. Jewell D. Our debt to those who are dying. *Br J Gen Pract* 2009; **59(568):** 809–810.

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Assisted dying

In his thoughtful editorial on assisted suicide,[1] David Jewell warns against medical paternalism and concludes by pointing out that doctors are '... not the public's masters but its servants'.

While I might agree with his assertion that '... the public understands these issue all to well', it is clear that such