**Senate Bill 579 will put vulnerable Oregonians at risk.**

Senate Bill 579 creates a dangerous loophole in Oregon’s physician-assisted suicide law. The bill removes waiting periods in the law designed to prevent abuse, same day suicides and protect vulnerable Oregonians from being coerced into ending their lives.

SB 579 makes it easier for bad actors to continue to harm the elderly, which is already a significant problem in Oregon. In 2016 alone, there were almost 4,000 reported victims of elder abuse.¹

- In 2018, Karin Boldt was sentenced to prison for the attempted murder of two elderly people within her care.²
- In 2016, Harvey Hanson died by an overdose of narcotics and tranquilizers administered to him by Avamere Riverpark of Eugene staff.³
- In 2005, two Oregon nurses assisted Wendy Melcher with her wish for assisted suicide and did so without a physician’s permission. The nurses were never prosecuted.⁴

Rather than helping prevent elder abuse, SB 579 will make it worse.

SB 579 removes safeguards promoted by supporters of assisted-suicide.

- When Measure 16 passed 25 years ago, the 15 day waiting period and the 48 hour waiting period stood as integral components of the law.
- The waiting periods, voters were told, would prevent coercion and ensure that a person makes an independent decision.

Removing the waiting periods will facilitate on-demand, same day assisted suicide and will not protect patients from coercion.

Oregon’s physician-assisted suicide law already lacks effective protections to prevent someone from administrating a prescription to a patient illegally. If a patient has a suicide prescription and ends up dead, the assumption will be that they took it. SB 579 allows someone with malicious intent to pressure a person to request, receive and take the lethal drugs on the same day.

- In 2008, Thomas Middleton moved in with Tami Sawyer after being diagnosed with Lou Gehrig’s disease. Sawyer was appointed as his estate trustee and two days after his death by assisted suicide, Sawyer deposited $90,000 into her account and sold Middleton’s home. A federal investigation found her guilty of criminal mistreatment and aggravated theft. However, the Oregon Health Authority did not investigate whether Middleton was manipulated into ending his life by assisted suicide.⁵

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¹These numbers are only the reported victims of elder abuse. Between 2005-2016, 7,846 complaints were not filed with the online database.  


Kate Cheney’s psychologist approved her competency to request assisted suicide for the second time after she was diagnosed with early dementia. He noted that Cheney’s daughter and family may have coerced her into making the decision. She later died by assisted suicide.\(^6\) SB 579 will not protect patients like Kate from being coerced but will make it easier.

Every person has a right to be valued and treated ethically, especially during their last days of life. Persons near death deserve the same protections under the law. Even more, they deserve proper care, compassion and confirmation of their inherent value, not a deadly prescription.

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This testimony was submitted by Dr. Kenneth Stevens, Jr. MD, in opposition to SB 579.

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Date: April 4, 2019
Re: Opposition to Senate Bill 579
Senate Health Care Committee,

Dear Chair Prozanski and members of the committee,

I have been a medical physician for 53 years. I have been on the OHSU Radiation Oncology faculty since 1972. I was chair of the OHSU Radiation Oncology Department from 1989 to 2005, and I am currently Emeritus Professor of Radiation Oncology at OHSU. I continue to practice medicine. I have cared for many thousands of patients with cancer. My first wife died of cancer in 1982. I have studied assisted suicide for many years and have learned of its many inherent dangers to patients, medicine and society.

Senate Bill 579 is one of the four bills proposed in the 2019 Oregon Legislative Assembly that would eliminate the limited safeguards in Oregon’s assisted suicide law. If these “safeguards” are eliminated, then members in medical fields, doctors specifically, will have a wider opportunity to end their patient’s lives.

Currently, those who desire to die from assisted suicide in Oregon have a 15-day waiting period as an opportunity to really understand and reflect on their decision to end their life. This is a heavy and momentous decision; a decision to end one’s life prematurely. The original language of this law recognizes the seriousness of this decision. The 15-day waiting period protects patients from making a hasty decision from which they can never recover. It protects them from making a hasty decision to end their life, a decision that may be influenced by others.

It is very very difficult for physicians to predict the life expectancy of their individual patients. In my more than 50 years of medical practice I have learned to be very cautious in making a prediction of how many days an individual patient has

to live. And I have learned not to make such a pronouncement to a patient. This is especially true regarding a life expectancy of 15 days or less.

The proposed language in SB 579 removes this important 15-day waiting period that is for the protection of vulnerable patients. Why is this needed if someone is felt to be within 15 days of dying? Especially since making such a 15-day or less prediction is so fraught with error. The new proposed language even permits a person to obtain lethal drugs and end their life on the same day when they have made the decision to use the law! This is not what Oregonians voted for in 1994 and 1997. SB 579 removes the protection from making a too hasty decision to end one’s life; a decision that may be influenced by others.

This bill removes important protections for vulnerable patients. I urge you to protect Oregonians who will be harmed by SB 579. I urge you to not accept this bill.

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