Nurse backs challenge to law on assisted dying

Life is for living, not just existing, says Alison Pickard, but charity fears change to legislation could damage nurse-patient relationship

When Alison Pickard was diagnosed with motor neurone disease (MND), she had established a nursing career that spanned five decades. Now, more than five years on from her diagnosis, she has given written evidence backing a High Court bid to challenge current legislation and make assisted dying legal.

‘I decided to give evidence because I have seen too many “bad” deaths during my nursing career,’ says Ms Pickard. ‘Life is for living, not just existing.’

Human rights

The case, which was heard at the Royal Courts of Justice in London last week, was brought to court by Noel Conway, a retired lecturer with MND. Supported by charity Dignity in Dying, he is fighting to have the option of an assisted death when he is in his final six months of life.

The 1961 Suicide Act makes it an offence to assist in a suicide in England and Wales, and the judges are considering whether current legislation breaches human rights laws.

A decision on the case is expected in the autumn.

Ms Pickard was a nurse for more than 42 years in paediatrics and later general practice. She worked her last shift as a nurse for a GP out-of-hours service provider at the start of this year. She is one of several witnesses who gave evidence in support of Mr Conway’s claim.

‘I feel there is a perception that all end of life symptoms can be well controlled. People also tend to think that the only distressing end of life symptom is pain,’ Ms Pickard says. ‘This is far from the case, particularly with neurological conditions such as MND, when difficulty breathing and communicating are huge issues, along with total immobility.

‘When I am no longer able to do things that give me quality of life, such as move independently, do the things I want to do, speak, eat, wash and go to the toilet independently, my quality of life will be very poor.

‘In short, I believe that it is up to each individual to decide at which point life has become intolerable and choose to end it.’

Ms Pickard, from Nottinghamshire, is still able to walk around the house, but needs help with tasks such as dressing, cooking and cutting food, as her left hand has very little function.

Although she currently has no problems with speech, swallowing or breathing, she uses voice recognition technology because her typing is much slower than it was.

Ms Pickard says her experience as a nurse has allowed her to view assisted dying from both sides, but that it was more difficult to speak out on the issue while she was still directly involved in patient consultations.

Mr Conway’s case is opposed by the secretary
of state for justice, with groups including Humanists UK, Care Not Killing and Not Dead Yet UK also making submissions. During last week’s hearing, James Strachan QC, on behalf of the secretary of state, described the case as tragic, but added that it was inappropriate for the courts to interfere with parliament’s decision on this ‘sensitive moral, social and ethical issue’.

**Pressure**

In 2015, 75-year-old palliative care nurse Gill Pharaoh ended her life at a Swiss clinic. She did not have a terminal illness, but said her experience as a nurse had shown her the ‘awful’ reality of old age.

Care Not Killing, a group that campaigns against assisted dying, described the case as ‘deeply troubling’.

Charity Christian Medical Fellowship’s head of nursing ministries Steven Fouch believes that if assisted dying is legalised in a narrow range of cases the ‘pressure will be on’ to expand it to other patient groups. He says requests for assistance to die almost always disappear when fears about the dying process and management of symptoms are dealt with effectively.

‘As nurses, our primary concern is the well-being of our patients. Once nurses’ role is changed to helping end their lives, how will that change our relationship with them?’

As many doctors are vocally opposed to being involved with assisted suicide for similar reasons, my real concern is that it will be nurses who will be obliged to step into the breach.

‘I further fear that this will mean that any expression of a conscientious objection will lead to disciplinary action and dismissals.’

In 2016 the RCN published updated guidance called When Someone Asks for Your Assistance to Die. It covers UK laws and offers practical examples as well as guidance on good end of life care.

It says nurses should resist the inclination to ‘ignore’ or abandon the conversation if a patient asks about assisted suicide, and should document conversations.

RCN professional lead for long-term conditions and end of life care Amanda Cheesley says: ‘While the RCN remains neutral on assisted dying, nurses should be prepared for these questions. They can form the basis of a non-judgemental discussion about the options available.

‘In certain circumstances, it may be appropriate to prepare an advance decision to refuse treatment. However, a patient cannot use an advance decision to request help in taking their own life.’

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