

LETTERS

Following the money

The research article by Trachtenberg and Manns¹ is a fascinating piece, which examines the cost-benefit analysis of assisted dying in our health care system.

One would have mused that the authors might have cited other research of a historic nature. I am referring to the article by Dr. Leo Alexander, which appeared in the July 1949 issue of the *New England Journal of Medicine*.²

In the article, the author documented a similar move by a society to advance the financial savings that the euthanasia movement could produce.

Lay opinion was not neglected in this campaign. Adults were propagandized by motion pictures, one of which, entitled 'I accuse,' deals entirely with euthanasia. This film depicts the life history of a woman suffering from multiple sclerosis; in it her husband, a doctor, finally kills her to the accompaniment of soft piano music rendered by a sympathetic colleague in an adjoining room. Acceptance of this ideology was implanted even in the children. A widely used high school mathematics text, "Mathematics in the Service of National Political Education," includes problems stated in distorted terms of the cost of caring for and rehabilitating the chronically sick and crippled. One of the problems asked, for instance, how many new housing units could be built and how many marriage-allowance loans could be given to newly wedded couples for the amount of money it cost the state to care for the crippled, the criminal and the insane.²

And what was Alexander's assessment of a society where this "cost-saving attitude" was propagated? He wrote:

Whatever proportions these crimes finally assumed, it became evident to all who investigated them that they had started from small beginnings. The beginnings at first were merely a subtle shift in emphasis in the basic attitude of the physicians. It started with the acceptance of the attitude, basic in the euthanasia movement, that there is such a thing as life not worthy to be

lived. This attitude in its early stages concerned itself merely with the severely and chronically sick. Gradually the sphere of those to be included in this category was enlarged to encompass the socially unproductive, the ideologically unwanted, the racially unwanted and finally all non-Germans. But it is important to realize that the infinitely small wedged-in lever from which this entire trend of mind received its impetus was the attitude toward the nonrehabilitable sick.²

Canada has crossed the line. Some have now decided to view the sick in this country as merely a financial burden. The medical community seems unwilling to learn from the mistakes of the "assisted dying" purveyors in Belgium and Holland ... or of history. We talk openly now of the benefits of organ harvesting ... and extending the right to die to those mentally unfit to know better.

As Chesterton wrote: "But we are already under the Eugenist State; and nothing remains to us but rebellion."³

Let that be the rally cry for those in the medical community to save us from those who forgot why they entered medicine in the first place ... to do no harm.

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[This letter represents the opinion of the author and not HCOS.]

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