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**Statement Regarding Physician-Assisted Suicide**  
**The Most Reverend Salvatore R. Matano**  
**Roman Catholic Diocese of Rochester**

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**January 2016**

Amidst the joys of this life there is one that looms high above all the others, the joy of parents who welcome their new-born child into their lives. When they cradle this precious gift of God in their arms, there are no words to express adequately the joy in their hearts. Heaven and earth unite in the marvelous gift of life. And so begins a journey for which there are no certain maps or charts. The course is filled with so many surprises and unexpected events, many joyous, some challenging, others disconcerting; there are anxious moments, times of worry and even heartaches. But through it all parents never stop embracing their children; theirs is a love without boundaries, unrestricted, forever alive and without question.

The precious life of the new-born child is the same precious life of the old and the frail, the weak and the suffering, the ill and the infirm, the distraught and the sorrowful. As we care for the child so must we care for all persons in the vast spectrum of human life. When we subjectively determine when life begins and ends, when it is viable or not, or when it is too burdensome to endure, we begin a path toward self-destruction. Life is no longer precious, but just another commodity in the business of living. Relativism becomes the absolute, and even the value of life itself is questioned.

The value of persons who are gravely ill and/or at the end of their lives is currently being questioned and their very lives threatened by a growing movement in our society to end life prematurely. Now pending in the New York State Legislature are two bills that would legalize physician-assisted suicide for patients diagnosed with a terminal illness. They are euphemistically titled the “End-of-Life Options Act” (S.3685/A.2129-A) and the “Patient Self-Determination Act” (S.5814/A.5261-B). These proposals ask those in the medical profession, a vocation dedicated to the service of life, to assist in the termination of the very lives they have pledged to heal and to comfort at life’s most critical moments. Dr. Herbert Hendin, the CEO and Medical Director of Suicide Prevention Initiatives in New York City, has urged New York lawmakers to reject the legalization of doctor-assisted suicide, and to focus instead on accessible quality end-of-life care. He states: “[E]vidence suggests that good palliative medicine can help people face death with dignity; assisted suicide falls far short of that goal” (<http://noassistedsuicideny.org/in-state-resources/> see Suicide Prevention Initiatives, New York City).



Dr. Michael Brescia, Executive Medical Director of Calvary Hospital in the Bronx, a specialty hospital serving advanced cancer patients, has recently noted that with groundbreaking advances in pain medicine, “the physical aspects of pain can be managed effectively for all patients. [W]e have found that with attention, affection and high quality care, we can prevent patients from saying they want to die” (<http://noassistedsuicideny.org/in-state-resources/> see Calvary Hospital, Bronx, New York). Indeed, we must not abandon our terminally ill sisters and brothers.

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Clearly, then, the rejection of physician-assisted suicide is not solely a Catholic position, it is a human rights imperative. The Catholic Church is the defender of Life in concert with physicians, nurses, pharmacists and other healthcare professionals; in union with these same people, we seek to protect people with physical and mental disabilities, those in life-threatening situations, and those who have no one to speak on their behalf, from being viewed as burdens to society when they are our sisters and brothers in the human family. What is needed is support for and the further exploration of healthcare measures that will effectively relieve suffering, so that the terminally ill might know and feel the love, concern, compassion and care of a society that protects them and cherishes them. This, in itself, eases the greatest pain, which attacks the heart when people feel no one cares!

The Catholic Church, united with persons of other faiths and people of good will, does care, especially for those who are the weakest among us! And our concern is not irrational. It is a very reasonable and noble concern, which appreciates the worth of the human person in his or her most difficult moments of life. In 2011, the United States Bishops stated: “Respect for life does not demand that we attempt to prolong life by using medical treatments that are ineffective or unduly burdensome. Nor does it mean we should deprive suffering patients of needed pain medications out of a misplaced or exaggerated fear that they might have the side effect of shortening life” (“To Live Each Day With Dignity: A Statement on Physician-Assisted Suicide,” USCCB, July 2011, p. 10, <http://www.usccb.org/issues-and-action/human-life-and-dignity/assisted-suicide/to-live-each-day>). The New York State Bishops, in their 2011 “Catholic Guide to End-of-Life Decision-Making, Now and at the Hour of Our Death,” note that “out of deep respect for the gift of life, we must always accept, and others must provide, ordinary medical means of preserving life. Ordinary means are those that offer us a reasonable hope of benefit and would not entail excessive burden on us, our family, or the community” (p. 3, <http://www.nyscatholic.org/wp-content/uploads/2011/11/End-of-Life-booklet-final.pdf>). But intentional euthanasia, the willful and conscious act of putting to death those who are sick, are disabled, or are dying, is morally unacceptable and a tragic offense against life!



photo by Mike Crupi/courtesy Catholic Courier

Bishop Matano receiving offertory gifts from the children of John and Dorina Hayes at the January 2015 Mass for Life at Sacred Heart Cathedral, where he spoke on the protection of all human life from the moment of conception to natural death.

I urge New York State lawmakers to reject the legalization of physician-assisted suicide, for it will inevitably put tremendous pressure on our most vulnerable citizens to end their lives. As the New York State Task Force on Life and the Law cautioned many years ago (1994), in an era of health care rationing and cost-cutting, assisted suicide could easily rise to the level of the most acceptable, inexpensive, and even expected “treatment” for terminal illness. We owe our brothers and sisters in the human family so much more.

I pray that reason will prevail and be guided by an even greater Wisdom. Shakespeare said it well many years ago: “There’s a divinity that shapes our ends, rough hew them how we may” (*Hamlet*, V .ii). Indeed there is One greater than ourselves and He said, “I have come so that they may have life and have it to the full” (John 10:10).

