

Evidence behind methods used for assisting death (assisted suicide or euthanasia)

v4



Worldwide, there is no agreed drug, combination or method for ending the life of a human.^{1, 2}



No assisted dying drug has ever been approved by a regulatory authority

Routes vary (oral, intravenous, nasogastric); drugs vary (anaesthetics, sedatives, opioids, neuromuscular blocking agents, cardiac-arrhythmia inducing chemicals, antiemetics); combinations vary (single drug or up to 5 drugs)



- Adverse events occurred in 9.3% of Oregon assisted deaths, NB. this excluded prolonged deaths (47 hours in 2019).²
- In community assisted deaths in Canada oral drugs failed in 3/13 cases.³
- The commonest adverse effects with oral drugs are vomiting, muscle jerks (myoclonus) and prolonged dying⁴
- Only one study 30 years ago has examined the failure rate of single oral drugs for assisted dying. This has never been repeated.⁵
- Even lethal injections for death-row prisoners have had failures with concerns about persisting consciousness.⁶

References

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