Paper of

Doctors for Life Ireland

delivered to

The Citizens’ Assembly

on

05 March 2017
Doctors for Life Ireland is an organisation for doctors who wish to uphold the practice of medicine as a service to human life at all stages. It was started in 1992 and is open to medical practitioners of every specialty, both working and retired. It aims to provide evidence-based and factual information to doctors and others who are concerned about the ethical questions relating to patient care and practitioner responsibility at all stages of life. It is not affiliated to, or part of, any other organisation. It is entirely funded by supporters who come from a range of medical specialties including general practitioners, psychiatrists, occupational health physicians, obstetricians and others.

Speakers: Dr. Orla Halpenny, GP, and Dr. John Monaghan, obstetrician (retired).

Irish health care has a long tradition of treating both patients in pregnancy, the expectant mother and her developing child. The position of our organisation has therefore always been that, in pregnancy, there are two patients. With the exception of a medical emergency that threatens the life of the mother, there are no clinical reasons to put one life before the other.

The practice of medicine is a service to human dignity and doctors must adhere to the highest standards of professional competence in treating, protecting and advocating for patients. The first principle of medical practice, is above all to do no harm (primum non nocere).

The current "Guide to Professional Conduct and Ethics for Registered Medical Practitioners states specifically:

You have an ethical duty to make every reasonable effort to protect the life and health of pregnant women and their unborn babies.¹

During pregnancy, rare complications can arise where a therapeutic intervention is required which may result in there being little or no hope of the baby surviving. In these exceptional circumstances, it may be necessary to terminate the pregnancy to protect the life of the mother while making every effort to preserve the life of the baby.²

Although the Medical Council acknowledges that, in this jurisdiction, abortion is legally permissible where there is a real and substantial risk to the life of the woman which cannot be prevented by other means, it warns medical practitioners that this risk may not be immediate or inevitable in all cases. This should be assessed in light of current evidence-based practice.³

¹ Guide to Professional Conduct and Ethics for Registered Medical Practitioners, 8th Edition, 2016, no. 48.1
² Ibidem no. 48.2
³ Ibidem, no. 48, 3
There is therefore an obligation on doctors to ensure that, as far as humanly possible and within the prevailing technical and clinical constraints, both lives are given the maximal chances of survival. This is standard obstetric practice and is fully supported by the Eighth Amendment.

THE TREATMENT OF SERIOUSLY ILL CHILDREN WHO ARE DIAGNOSED BEFORE BIRTH.

In your study of the Eighth Amendment over the past several weeks, you will have heard the suggestion that the Amendment places a restriction on parents who have been told that their baby will be born with a life-limiting illness and who wish to end the pregnancy for this reason, even though there is no question of the mother's life being at risk. This is, of course, entirely true.

Some parents receive the sad news that the baby they are expecting is unlikely to survive for long after birth. The wish to escape this future and to avoid suffering, either for themselves or for their child, is understandable.

In this situation, doctors are called upon to be compassionate with, and supportive of, parents who are both shocked and grieving and to facilitate them in every way throughout the pregnancy. However, the doctor must also remember that the dying or disabled child in the womb is no different from the dying or disabled child outside the womb. The ethical responsibility to respect his or her life and to avoid intentionally harming them is still valid.

Doctors for Life oppose the termination of pregnancy for reasons of terminal illness or disability diagnosed in the infant prior to birth and we wholeheartedly support the provision of appropriate hospice care for children born with life-limiting illnesses and their families.

Children who are diagnosed in the womb with life-limiting conditions deserve the same care as other people who are terminally ill. We would like all sick babies be nurtured, made comfortable and allowed to experience the warmth of the love of other people before they die, because this is what true palliative care is about.

CHOICE

The Eighth Amendment allows doctors to use all clinical means at their disposal to protect the lives of the mother and her baby. It does not allow for personal choice as to which of the two should be allowed to live. We in Doctors for Life do not think that the Eighth Amendment has failed. The fact that so many of those in favour of repealing it have stated publicly that they see it as an obstacle to abortion on demand must mean that it is precisely that, and that its removal would lead, inevitably, to abortion on demand. What rights will the patient in the womb have then?
You have generously set aside a lot of time for the Citizens' Assembly and it is very much appreciated. Before you finally make up your minds on the question of the Amendment, we would like to strongly encourage you to watch Sally Philips' documentary, broadcast some months ago on BBC2, entitled "A world without Downs". We suggest this, not because the documentary refers mainly to Down Syndrome but because it raises questions about the consequences of freedom of choice which you, as individuals, have to answer to your own satisfaction as you make your decision.

The members of the Citizens' Assembly may consider that they are only offering the Irish people a referendum on their own Constitution, but at stake are the lives of other citizens whose rights will be set aside.