

'Any taboo has gone': Netherlands sees rise in demand for euthanasia

Demand has soared since 2002 law that made it legal, fuelled by postwar generation with clear idea on how to shape their lives, and deaths



Steven Pleiter, director of the Levensidekliniek in The Hague, the Netherlands: 'We are helping out in a situation which is really, really difficult.' Photograph: Judith Jockel for the Guardian

Daniel Boffey in The Hague

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The number of people euthanised in the Netherlands this year is set to exceed 7,000 - a 67% rise from five years ago - in what has been described by the director of the country's only specialist clinic as the end of "a taboo" on killing patients who want to die.

In 2012, 4,188 people were euthanised by doctors in the country, all of whom met the criteria laid down under the 2002 law that made it legal: a voluntary and well considered request in the context of unbearable suffering from which there is no prospect of improvement, or alternative remedy.

This year, 18,000 requests for help to die have been made, including 2,500 - up from 1,234 in 2015 - to the Levensidekliniek - the only medical facility in the Netherlands that specialises in euthanasia.

The clinic is a charity whose costs are covered by a standard Dutch health insurance policy.

Steven Pleiter, director at the clinic, said that in response to growing demand he was now on a recruitment drive aimed at doubling the number of doctors and nurses on his books willing to go into people's homes to administer lethal injections to patients with conditions ranging from terminal illnesses to crippling psychiatric disorders.

Pleiter has 57 doctors on call but he believes he could need more than 100 by the end of next year with a growing number of people in Dutch society seeking an organised death.

The Levenseindekliniek was founded to respond to "more complex cases", when patients have often had their application to die rejected by their GP, for reasons ranging from the ethical to the legal, or even just a lack of resources. Doctors at the clinic euthanised 32 patients in 2012, but it will help 720 people to die by the end of this year.

"If there was any taboo, it has gone," Pleiter said. "There is a generation coming up, the postwar generation, which is now coming to the life stage in which they will die, and this generation has a far more clear and expressed opinion about how to shape their own life end. I expect far more growth in the years to come."

From TV and radio appearances, to direct-mail shots and the placement of adverts in medical journals, Pleiter said he had thrown everything at getting doctors signed up to work for the clinic in the last two weeks. Macabre as it may sound, the former IT project manager said he was worried about his waiting lists, and the burden on the doctors he employs.

"It's the first time," Pleiter said of the recruitment drive, sitting in his bright and airy office near the centre of The Hague, where the clinic's neighbours include legal firms and a kindergarten. "Until today we rarely needed to search for doctors. That is changing now. We need a dramatic growth in doctors as the numbers have changed so much..."

"We ask the doctors to work eight to 16 hours a week for this organisation. A full-time job involved in the death of people is probably a bit too much, and 'probably' is a euphemism."

The clinic invests a great deal of time in every case, Pleiter said. Once a patient has seen a GP, they are open to make contact with the clinic but as many as 15 interviews or more can be conducted with those who say they want to end their suffering before approval is given.

Second opinions are then sought on the patient's medical history, as demanded under the law. Depending on the case, it can variously take days or months before a drug putting the patient into a coma, and then a second disabling their lungs, is administered intravenously, or in a drink. After the procedure has been performed the treatment of every patient is reviewed by an official independent panel.

There have been five cases where the panel ruled that the correct protocols were not carried out, but there is yet to be a prosecution.

The professionalism of the operation is not in doubt. Some question, however, whether things have gone too far.

Prof Theo Boer, who sat on the euthanasia review committee between 2005 and 2014, supported the 2002 legislation but believes the scope of it is now too wide and death has become too professionalised.

“Starting from 2007, the numbers increased suddenly,” Boer said. “It was as if the Dutch people needed to get used to the idea of an organised death. I know lots of people who now say that there is only one way they want to die and that’s through injection. It is getting too normal.”

Boer, a professor of ethics at the Theological University of Kampen, added: “In the beginning, 98% of cases were terminally ill patients with perhaps days to live. That’s now down to 70%.

“There is no dispute about the good intentions of the people at the end of life clinic. [But] they may have become too used to doing euthanasia. Yes they have expertise but they are too experienced. You should never get used to helping someone die.”

It is not, however, a description the clinic would recognise. On Pleiter’s office wall are three large photographs of the last days and moments in the life of Siep Pietersma, 79, who took the option of drinking his poison, after deciding that he did not want his dementia to progress to that suffered by his own mother. “He was very clear,” said Pleiter.

Pleiter further mentions the case of a 60-year-old man with a compulsive personality disorder, which compelled him to spend hours every morning cleaning a cupboard, and then regularly self-harm with a razor, before he finally asked the clinic to end his life-long hell.

“Unbearable suffering without prospect of improvement. That is all [the law] says,” Pleiter argues. “It does not say you need to be suffering from cancer, need to be in a terminal state.”

“If we can help them out these people are relieved. We are not ‘Doctor Death’ at all. We are helping out in a situation which is really, really difficult.”

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