



## Dear Readers,

*It was great fun. I became a member of the International Workgroup (IWG) on Death, Dying and Bereavement some 15 years ago. I participated in the meetings three times, I think. However, I later needed to withdraw because of lack of funding. Now, after so many years, I have seen my colleagues and friends from the IWG in Melbourne, Australia, again. It was as if nothing had changed in all that time. Some people did not show up (perhaps they were ill or dead?); others looked a bit older than a decade ago. However, the fun of seeing each other was no less because of this. I also enjoyed participating in a week-long discussion on actual medical ethical problems in palliative care. We reviewed all the current problems and, just as we had 15 years ago, we looked again at the issue of euthanasia and assisted suicide. In the past, American colleagues from the IWG were unanimously opposed to changing the law and condemned what was happening in Oregon, The Netherlands and Belgium. This has, apparently, now changed. In general, experiences from Oregon and Washington (the second state to legalise assisted suicide). In general, experiences from Oregon and Washington (the second state to legalise assisted suicide) showed that both physicians and patients' (families) were pleased with the service. A flood of evidence from The Netherlands and Belgium, all of it supported by the governments, has been a powerful tool in convincing readers. Families were happy and the doctors relieved. As a result, many of my American colleagues have lost their passionate conservative plea to preserve the status quo and are now opting for the "new". It looks as if the evidence is now changing the ethics and nothing will be as it was. Nothing is stable or independent any more.*

*In my group I asked a question: how do you respond to the patient who says to you: "If I were a dog, you would take me to the vet" or "Why do we put ill and old dogs to sleep and find this the most humane thing we can do for them, but refrain from putting down old or frail patients, who probably suffer a lot more than dogs?" The answer to my question was a little disappointing. Our American colleagues (there were three in my group) said in chorus that the law prohibits them from killing people and that's that. Others tried to get to the philosophical nucleus of this problem. No one could exhaust the discussion or give me a convincing argument that I could use in discussions with my patients. Wouldn't this be a great idea for a book? Simply to ask a number of people what makes us different from dogs and other animals. Have you thought about this? I would be curious to hear your responses too.*

*So, in conclusion, decades of discussion about assisted suicide and euthanasia, supported by some money from those governments most interested in applauding their policy, have proved to be effective in changing the minds of many doctors worldwide. A long time ago, I thought that ethics and philosophy were absolute and unchangeable. Now I see that nothing is stable and constant. Although the Basic principles like „Thou shall not kill“ are still solid like a rock, the rich societies succeed in changing their meaning to us. The utilitarian points of view overwhelm more and more the ideals with which I grew up. I know, Poland undergoes rapid cultural changes, like they would like to catch-up forty lost years of communist rule. Will above mentioned signals coming from the West not confuse this vulnerable society? Will the society be able to debate these issues maturely and with dignity?*

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