

DIGNITAS

To live with dignity

To die with dignity

Objectives and purpose of DIGNITAS

The association "*DIGNITAS – To live with dignity - to die with dignity*" was founded on 17 May 1998 at Forch (near Zurich). The organisation, which pursues no commercial interests whatsoever, has in accordance with its constitution the objective of ensuring a life and a death with dignity for its members and of allowing other people to benefit from these values. DIGNITAS pursues these objectives by assisting its members everywhere in word and deed, within the limits of the possibilities available to the association and as appropriate in individual cases.

In accordance with this purpose the activities of DIGNITAS comprise, amongst others:

- Counselling in regard to all end-of-life issues
- Cooperation with physicians, clinics and other associations
- Carrying out Patient's Instructions and patient's rights with regard to doctors and clinics
- Suicide- and suicide-attempt prevention
- Support in conflicts with the authorities, with the management of nursing homes and with doctors not chosen by the patient
- Further legal developments in regard to questions about "the last issues"
- Accompaniment of dying patients and assistance with a self-determined end of life.

For a one-off joining fee of Swiss Francs (CHF) 200 and an annual membership subscription of at least CHF 80 – the amount is at each individual member's discretion – one obtains access to the services of DIGNITAS and supports the association in its commitment to safeguarding human dignity and the human rights of its members in life and in death, whenever these may be regarded as under threat.

DIGNITAS invests any and all accounting surplus in the expansion of its services and in suicide prevention.

DIGNITAS' Patient's Instructions

Many people are afraid of finding themselves in a hopeless condition or unconscious and connected to machines in a hospital and being kept alive artificially for a long period of time. They are afraid of pointless operations and ineffective pharmaceutical therapies.

Against this helplessness and feeling of being at the mercy of high-tech medicine, there is only one tried and tested method: Patient's Instructions which can be legally implemented. This involves, on the one hand, a binding unequivocal text drafted by experienced specialists, and on the other hand, an efficient organisation such as DIGNITAS which can ensure that the Patient's Instructions are carried out, even, if need be, in the face of resistance.

For their dying phase, and for the duration of their membership, DIGNITAS supplies its members with legally effective Patient's Instructions. These must be respected by doctors and hospital nursing staff and, in order to ensure that those instructions are carried out, DIGNITAS provides its members with the direct support of a lawyer, if necessary.

Because Patient's Instructions are closely related to the law of the country in which they are issued, this service can generally only be granted within Switzerland.

Accompanying dying patients at the end of their lives and assistance with suicide

A further important service provided by DIGNITAS is **accompanying** dying members at the end of their lives. Conversations with the sick member and – at his/her request – with those persons close to him/her, are intended to make saying goodbye easier for all those involved.

Anyone suffering from an illness which will lead inevitably to death, or anyone with an unendurable disability, who wants voluntarily to put an end to their life and suffering can, as a member of DIGNITAS, request the association to help them with accompanied suicide.

Legal assistance for suicide with DIGNITAS

DIGNITAS' qualified staff have a great deal of experience with end-of-life is-

suues and accompanying dying patients. They will first establish, in detailed discussions with the member, whether they meet the pre-conditions to be complied with by DIGNITAS for assistance with suicide, and whether the wish to die reflects the settled and declared will of the member. In this, it is particularly important to determine whether **the member's capacity of discernment** is impaired in any way, and whether anyone close to him/her, or third parties, are pushing the member towards suicide for any reason.

In the case of medically diagnosed hopeless or incurable illnesses, unbearable pain or unendurable disabilities, DIGNITAS offers its members the option of an accompanied suicide. DIGNITAS procures the necessary medication for this, a lethal, fast-acting and completely painless barbiturate which is dissolved in ordinary drinking water. After taking it the patient falls asleep within a few minutes, after which sleep passes peacefully and completely painlessly into death.

Naturally, each permitted use of a fatally effective medication requires a Swiss doctor's prescription, for only by this means can the drug **legally be procured**. People resident in Switzerland should first discuss with us the question of which doctor may issue the prescription: in most cases nowadays, the person's family doctor is prepared to do so.

Where this is not the case, and for people who are not resident in Switzerland, DIGNITAS calls on doctors who cooperate with DIGNITAS. After an in-depth evaluation of the member's written request and medical information, and fol-

lowing at least two face-to-face meetings with the member (which allows the DIGNITAS doctor to satisfy him- or herself that the member meets the pre-conditions for the desired accompanied suicide) the prescription may be issued to DIGNITAS.

From this time onwards, the member wishing to die can arrange the time of their accompanied suicide with DIGNITAS. There are always at least two people present at an accompanied suicide: they can then testify as to the course of events.

Frequently, members want to die in the company of those closest to them. DIGNITAS emphasizes the importance of involving friends and relatives in the process: the “long journey” that is assisted dying requires careful preparation for and consideration of the appropriate time to say farewell.

DIGNITAS’ experience shows that only a very few people who enrol as members take advantage of the service for assistance with suicide. They usually feel sufficiently protected by the Patient’s Instructions. If these are observed – because they specify that no life-prolonging measures are to be initiated – any life-threatening situation will lead to a natural death. Membership of DIGNITAS endows members with confidence: in the event of a hopeless situation, a member can say “I have had enough now, I want to die.” This feeling of security is of exceptional importance to mature human beings.

The legal basis

Article 115 of the Swiss Federal Criminal Code (StGB) states that:

“Whoever, from selfish motives, induces another person to commit suicide or aids him in it, shall be confined in the penitentiary for not over five years, or in the prison, provided that the suicide has either been completed or attempted.”

In plain English that means: anyone who helps someone to commit suicide, providing they are not acting out of selfish motives, cannot be punished. The assistance with suicide provided by DIGNITAS rests on this legal basis. As the DIGNITAS escorts are paid by DIGNITAS itself, selfish motives are out of the question. DIGNITAS works on an indisputably legal basis.

The people behind DIGNITAS

DIGNITAS’ structures of association and organisation have been deliberately chosen so that work can be performed efficiently and without conflict, and so that all energies can be invested in the service of the members. At DIGNITAS, the Secretary-General ensures that the day-to-day activities of the association are in accordance with its constitution. He determines the required legal and organisational structures. This task is performed by *Ludwig A. Minelli* (Forch), a lawyer and the founder of DIGNITAS. A committee of specialist consultants sits

alongside the Secretary-General to answer all expert questions. This committee usually contains, amongst others a doctor and a lawyer.

A team of dedicated assistants is available to answer all membership questions, to help with preparations for accompaniments, and for counselling etc.

The members of the escort team are all experienced and qualified, and they regularly undergo further training and instruction.

The management of DIGNITAS is dealt with by *Ludwig A. Minelli*.

The membership of DIGNITAS

DIGNITAS comprises different groups of members. A small group of active members forms the basis of the association; this group created the constitution and thus set the goals for which DIGNITAS stands, and it oversees the realisation of those goals.

The committee members have the task of acting as specialist consultants to the management of the association. They are all qualified in their respective specialist fields.

In principle, all adults can become ordinary members of DIGNITAS even if they are not resident in Switzerland and have foreign citizenship. However, we must make it quite clear that DIGNITAS can only provide its members with support within Swiss national territory.

Members who want to secure the services of DIGNITAS have the right to legally effective Patient's Instructions, to being accompanied at the end of their lives and also to assistance to an accompanied suicide. In addition they are entitled to counselling, so far as the association can provide it, in everything

concerning their human dignity in life and in death. DIGNITAS attaches great importance to providing its members with contacts for whom humanity is of great value. The DIGNITAS motto "To live with dignity – To die with dignity" is a promise.

In order to join DIGNITAS, one only needs to fill in the declaration of membership and send it to DIGNITAS. DIGNITAS will confirm the acceptance of membership in writing and provide the DIGNITAS Patient's Instructions form. With this letter the new member also receives an invoice with detailed payment instructions. The member fills in the Patient's Instructions and returns the original to DIGNITAS. DIGNITAS registers the Patient's Instructions and provides the member with sufficient copies. This concludes the process of becoming a member of DIGNITAS.

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To die with dignity"

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To live with dignity –
To die with dignity
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One-off joining fee: CHF 200.-
(approx. €160.- / USD 240.- / GBP 150.-)

Minimum annual member fee: CHF 80.-
(approx. €65.- / USD 95 / GBP 60.-)

Please **do not send** any money until you have received our confirmation that you have been registered as a member of DIGNITAS, and **never send cheques** – the fees which banks charge to cash cheques are extremely high. You will receive detailed payment information.

Address:

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Switzerland

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Internet: www.dignitas.ch
E-mail: dignitas@dignitas.ch

Secretary-General and Management:
Ludwig A. Minelli, lawyer, Forch

Bank accounts:

Clientis Zürcher Regionalbank
Wetzikon/ZH, P.O. Box,
CH-8620 Wetzikon
Account no.: 16 5.031.809.08 6850
Bank sorting code: 6850
IBAN: CH76 0685 0016 5031 8090 8
BIC / SWIFT: RBABCH22850
Bank's postal account no.: 30-38225-3

Postfinance Bern
Account no.: 87-64492-2
IBAN: CH79 0900 0000 8706 4492 2
BIC / SWIFT: POFICHBE

For payments in Euro €only:

Commerzbank, Berlin, Germany
Account no.: 16 5.031.809.08 6850
BLZ: 10040000
IBAN: DE95 1004 0000 0806 0683 00
BIC / SWIFT: COBADEFFXXX

Payments are also welcome via **PayPal**:

www.paypal.com to our e-mail-address
dignitas@dignitas.ch (please add 5 % to
the payment in order to cover the fees of
PayPal)

or via **Moneybookers**:

www.moneybookers.com to our e-mail-
address dignitas@dignitas.ch (please add
3 % to the payment in order to cover the
fees of Moneybookers)

Prerequisites

In order to access the service of an accompanied suicide, someone has to:

- be a member of DIGNITAS, *and*
- be of sound judgement, *and*
- possess a minimum level of physical mobility (sufficient to self-administer the drug).

Because the co-operation of a Swiss medical doctor (physician) is absolutely vital in obtaining the required drug, further prerequisites mean that the person must have:

- a disease which will lead to death (terminal illness), *and/or*
- an unendurable incapacitating disability, *and/or*
- unbearable and uncontrollable pain.

Any member of DIGNITAS – no matter whether resident within Switzerland or ‘abroad’ – can ask for an accompanied suicide to take place at the DIGNITAS’ premises. In addition to meeting the prerequisites set out above, the member must submit a formal request for the preparation of an accompanied suicide to DIGNITAS. This request must comprise:

- A personal letter to DIGNITAS, preferably typed, in which the member asks for an accompanied suicide with the help of DIGNITAS. The letter must state the reason(s) for making the request and must describe the member’s present physical condition and how it affects them.
- A biographical sketch / CV, also describing the member’s situation with respect to their next of kin – whether and to what extent they support the

member’s wish for an accompanied suicide, and whether the member might be accompanied by members of their family and/or close friends during the trip to Switzerland. DIGNITAS and the doctors assessing a request use this information to get a clear picture of the member’s personal background and family circumstances.

- One or more up-to-date medical reports together with two or three older ones. These reports must provide substantial information on the case history, diagnosis, and - if possible - actual and suggested treatment / measures as well as prognosis. The most recent report must not be more than three to four months old, and all reports must be clearly legible. Pictures, such as x-ray films etc., and laboratory analyses should not be included.

Obviously, it is important to ask doctors and clinics to provide copies of medical reports at an early stage. These reports must be in English, French or German; for other languages official translations must be obtained and provided.

Once DIGNITAS receives a member’s complete request, it can be processed and passed on for assessment to the Swiss medical doctors cooperating with DIGNITAS. Assuming that the doctors agree to help in the specific case (by giving the so-called “provisional green light”), DIGNITAS will inform the member after which all further steps may be discussed in detail. The “provisional green light” is the preliminary consent

of a Swiss medical doctor, which bases on the request and the medical file. However, definite decision remains reserved until personal consultation between the Swiss medical doctor(s) and the member.

The actual course of the accompanied suicide

For people who live in Switzerland, the accompanied suicide generally take place at their home.

Members residing outside Switzerland travel to DIGNITAS only after having received the “provisional green light” and on a mutually agreed date. The accompanied suicide can take place at convenient premises provided by DIGNITAS, given that the consulting Swiss medical doctor has written the prescription for the lethal drug in the sense of a “definitive green light”.

The member wishing to have an accompanied suicide determines the course of action to suit him- or herself. The escorts / helpers of the DIGNITAS team will ensure the correct technical procedure.

After taking an anti-emetic, the member may ingest a fatal dose of Sodium Pentobarbital (NaP), usually 15 grams. This is normally administered in a glass of water, approximately one decilitre.

Pentobarbital of Sodium – also called Sodium Pentobarbital or Natrium-Pentobarbital (NaP) – is an approved sleeping and narcosis drug. As it is alkaline and does not taste pleasant, something sugary may be drunk or eaten immediately afterwards.

Members, who cannot swallow and who are fed via a gastric tube will administer the drug themselves via this tube. A member who can neither swallow nor handle the gastric tube may, by pre-arrangement, administer the Sodium Pentobarbital intravenously. For this it is essential that the patient arrives at DIGNITAS with a prepared and properly functioning intravenous access point.

In every case, for legal reasons, the patient must be able to undertake the last act – that is to swallow, to administer via the gastric tube or to open the valve of the intravenous access tube – him- or herself. If this is not possible, DIGNITAS is unfortunately unable to help.

After taking the drug, the member will fall asleep within two to five minutes before slipping into a deep coma. After some time, the Sodium Pentobarbital paralyses the respiratory centre which leads to death.

This process is absolutely risk-free and painless.

One member’s last words to his spouse were: “I feel fine; everything is so relieving”. Next of kin experience the proceedings as dignified and peaceful which helps them to handle events afterwards very well. The empathetic accompaniment and support given by the DIGNITAS escort team contributes substantially to this.

Attendance of next of kin and/or close friends

DIGNITAS encourages and welcomes the attendance of next of kin and/or close friends at an accompanied suicide. **In all events, next of kin and/or close friends should be informed as early as possible: they should be told about and given the opportunity to cooperate with decision-making regarding the accompanied suicide.** The earlier people become familiar with your choice, the more likely it is that they will support you through it.

Those who do not inform their next of kin and appear to "sneak away" into the beyond run the risk of hurting the feelings of the people closest to them and possibly even making them angry. Their rage might then unjustly be directed against DIGNITAS, despite the fact that this organization strongly advocates the rights of the next of kin and close friends to be present at an accompanied suicide. Having the chance to say goodbye to a loved one can help people to cope much better with their loss and can help to ease any anxieties about the death.

If no next of kin or friends are able or willing to attend the accompanied suicide, DIGNITAS can appoint two people to do so.

DIGNITAS is not allowed to dispense lethal drugs

People sometimes ask whether DIGNITAS can simply make the lethal drug used for accompanied suicides available to them. The short answer is

‘no’. Because the substance is officially listed as a narcotic, its use is regulated. It can be obtained only on production of a prescription written by a physician allowed to practice medicine in Switzerland. In order to ensure a chain of custody the prescription will only be handed over to DIGNITAS, never directly to the patient. Additionally, as far as we know, only very few pharmacies can supply it readily. The Swiss physician who prescribes this drug must not only meet the patient in person but must also, following a request by Zürich’s Chief Medical Officer, “examine” him or her. This means that anyone wanting to undergo an accompanied suicide by DIGNITAS must, without fail, meet the medical doctor who has provided the “provisional green light” previously mentioned.

Moreover, an organization such as DIGNITAS is strictly prohibited from making the drug available to anyone. It is always a member of the DIGNITAS-team who brings the drug, at a predetermined time, to the place where the accompanied suicide is due to take place. Because taking the drug across the border would constitute the criminal offence of smuggling narcotics, we cannot travel abroad carrying it. Handing it over to anyone who then smuggles it would also lead to legal action against DIGNITAS. Additionally, such behaviour might bring about a tightening of the Swiss legislation which would render our activities inside Switzerland more difficult and could even make them impossible.

DIGNITAS has long-standing experience

Founded in 1998, DIGNITAS can look back on quite some years of experience. During this time, DIGNITAS has helped 1.170 of its members to a self-determined end of life. The majority of these members came from Germany and Switzerland, while others came from France, the United Kingdom, Austria, Italy, Greece, Israel, the United States and many other countries.

Only a small number the members of DIGNITAS who ask for the preparation of an accompanied suicide actually make use of this option. After having received the “provisional green light”, some ‘let go’ surprisingly soon and pass away naturally, peacefully, at home. Others live on for weeks, months, even years, and cope well with their suffering through having gained a new attitude towards it: they know that there is an “emergency exit door”. This knowledge releases them from the pressure caused by their dilemma, whether to put up with their suffering until the very end or put an end to their suffering by attempting suicide themselves with possibly inadequate methods that entail great risks of failure and further suffering.

In this way, DIGNITAS has a real – and initially barely hoped-for – life-prolonging effect.

The most striking example may be the case of a 34 year old man suffering from AIDS. After receiving the “provisional green light” he decided to take the next step and arranged with DIGNITAS to come to the doctors’ consultation. The doctor examined him and issued the pre-

scription to DIGNITAS, after which he returned home. Some time later he wrote to DIGNITAS, saying that he had had to see a psychiatrist: after his return home he had felt much better and the laboratory results had improved to the extent that he was looking at possibly further years of life – not just the weeks or months he had thought was the case. All this had thrown him into an emotional turmoil which he could not cope with on his own...

People seek help and advice from DIGNITAS for all sorts of reasons. As a result, DIGNITAS’ reaction depends on the individual situation and we always seek the most appropriate solution. It is understood that we very much give prominence to look for solutions towards life, solutions which could make possible carrying on.

Challenges that DIGNITAS deals with

The activities of an association which advocates taking the taboo out of suicide, the right to a self-determined end of life and patients’ rights, are obviously controversial. Some people appreciate such activities and others condemn it, depending on their ideological point of view.

For DIGNITAS, respect for human freedom and every single person’s right to self-determination are of paramount importance.

However, this alone cannot suffice to position such an association. It also in-

volves taking a clear stand on related problems. Therefore, in essence, DIGNITAS is concerned with three issues:

1. questions about suicide- and suicide-attempt prevention (prophylaxis);
2. the question of whether certain services should only be available to people resident in Switzerland, or should also be made available to people who live 'abroad';
3. the question of whether people with mental health issues (for example schizophrenia or chronic depression) or healthy people who simply decide that they have "lived long enough" should have the right to a risk-free self-determined end of life.

DIGNITAS gives intensive consideration to the question of suicide- and suicide-attempt prevention. The fact that every year in Switzerland up to 66'650 suicide attempts fail – in the UK this number is up to 264'800 – demands that we deal with this issue. Many people injure themselves badly and suffer long-lasting physical and often also mental problems, with severe emotional and financial consequences for themselves, their next-of-kin and friends, and also for the public health system and the economy. The suicide issue must be freed from the taboo surrounding it and discussed openly. In a similar way to the issue of abortion, an ideal solution will not be readily available. However, it is our duty to search for the best answer to the problem. DIGNITAS always looks for opportunities to help people towards life instead of death.

Regarding the question of accompanied suicide for people resident outside Switzerland, DIGNITAS finds it ethically unacceptable to differentiate between people who are suffering intolerably based on whether they are resident in Switzerland or 'abroad'. Furthermore, doing so could be seen as an intolerable discrimination and therefore a violation of article 14 of the European Convention on Human Rights (ECHR).

Contrary to a widely-held opinion, people suffering from mental health problems normally have sufficient capacity of discernment to decide whether they would like to continue living or end their life. Therefore, and as a general rule, they are entitled to ask for an accompanied suicide and receive assistance just as much as people suffering from physical health problems, in order to avoid the high risk of failure. The same applies to healthy people who wish to end their life because they feel that it has become too arduous for them due to old age. There are no rational reasons to patronise these people through paternalism.

A word on religious issues

Interestingly, DIGNITAS members very rarely bring up religious questions in connection with accompanied suicide. If anything, such questions are much more likely to be raised in public discussions.

A code of practice for Catholic politicians issued by the Vatican says that one must do one's utmost to protect life from conception until its natural end. Coincidentally this direction relies on the words of one of the most famous saints of the Catholic church: the holy Thomas More. On October 31st 2000, Pope John Paul II appointed him patron of all statesmen and politicians.

This move is a positive one regarding end-of-life and assisted dying issues: in his famous book "Utopia" – which outlined his view of an ideal society – **Thomas More**, described how the Utopians treat their sick fellows:

"I have already told you with what care they look after their sick, so that nothing is left undone that can contribute either to their ease or health: and for those who are taken with fixed and incurable diseases, they use all possible ways to cherish them, and to make their lives as comfortable as possible. They visit them often, and take great pains to make their time pass off easily: but when any is taken with a torturing and lingering pain, so that there is no hope, either of recovery or ease, the priests and magistrates come and exhort them, that since they are now unable to go on with the business of life, are become a burden to themselves and to all about them, and

they have really outlived themselves, they should no longer nourish such a rooted distemper, but choose rather to die, since they cannot live but in much misery: being assured, that if they thus deliver themselves from torture, or are willing that others should do it, they shall be happy after death. Since by their acting thus, they lose none of the pleasures but only the troubles of life, they think they behave not only reasonably, but in a manner consistent with religion and piety; because they follow the advice given them by their priests, who are the expounders of the will of God. Such as are wrought on by these persuasions, either starve themselves of their own accord, or take opium, and by that means die without pain. But no man is forced on this way of ending his life; and if they cannot be persuaded to it, this does not induce them to fail in their attendance and care of them; but as they believe that a voluntary death, when it is chosen upon such an authority, is very honourable."

The former Catholic synod theologian Prof. Dr. Hans Küng, a Swiss who lectured at the University of Thüringen in Germany for decades, emphasized that God gave humans responsibility for their entire lives. Therefore, one may also return this gift of life to the creator if it becomes too arduous.

Terminology and Definitions

Assisted Suicide and Euthanasia are not the same:

Direct active euthanasia on express request (voluntary euthanasia): the person wishing to end his/her own life requests and permits a third person to put an end to his/her life, for example by injection of a lethal drug. This “killing on request” is prohibited in Switzerland (article 114 of the Swiss Penal Code) – however, it is legal under strict guidelines and provided by doctors in Belgium, Luxembourg and The Netherlands, but only for residents.

Direct active euthanasia without express request (non-voluntary euthanasia): this is generally illegal.

Indirect active euthanasia (double effect): the patient receives drugs to lessen the pain and/or distress of his/her suffering at a dosage which unintentionally but not always unavoidably shortens the patient’s life and brings about death earlier. For example: palliative treatment / terminal sedation of cancer patients. This form of assistance at the end of life is not explicitly regulated by law, yet it is generally acknowledged and widely practiced.

Passive euthanasia (termination of treatment, “to let die”): ending (or not starting) life-maintaining and life-prolonging therapies, renouncing treatments, waiving food and drink. This is legal.

Accompaniment of dying patients: any medical support and human aid for the dying, as long as there is no shortening

of life. The dying patient is not left alone but cared for, next-of-kin and friends are at his/her side.

Assistance (by physicians or others) with a self-determined end of life: in contrast with the different forms of “euthanasia”, the decision-making process remains with the person who wishes to end his/her own life. The patient decides on the end of his/her life and intentionally brings about his/her own death. In Switzerland, this assistance is legal as long as anyone abetting or helping another person to commit suicide does not have any selfish motives (article 115 of the Swiss Penal Code).

Accompanied suicide: Comprising elements of assistance with a self-determined end of life and accompaniment of dying patients, it most precisely pinpoints what is made possible for members of associations like DIGNITAS, EXIT, etc. The person wishing to put an end to his/her own life commits a carefully prepared and well-thought out suicide and is not left alone but cared for and is accompanied, generally in the presence of next-of-kin and friends and usually at his/her home.

Euthanasia: from the Greek, meaning “good, well, death”. As this term may relate to different issues, ranging from help at the end of life and putting down animals to the atrocities of the Nazi regime, it is not precise and should not be used in the context of assisted and accompanied suicide.

Further information – A selection for those interested

The website of DIGNITAS

www.dignitas.ch (if necessary, click on  **English** near the top right corner as to switch to the English site)

Further associations in Switzerland and around the world

www.exit.ch
www.exit-geneve.ch
www.exinternational.ch
www.worldrtd.net/taxonomy/vocabulary/1

Suicide and suicide prevention

www.soars.org.uk
www.befrienders.org
www.samaritans.org
www.afsp.org

Patient's Rights, Living Wills and Humanism

www.direct.gov.uk/en/Governmentcitizensandrights/Death/Preparation
www.who.int/genomics/public/patientrights/en
www.compassionindying.org.uk/advance-decisions.html
www.the-brights.net

Books

“Euthanasia and law in Europe“

The book with an in-depth description of the legal situation in Europe by J. Griffiths, H. Weyers and M. Adams. ISBN 978-1-84113-700-1

“To Die Well: Your Right to Comfort, Calm, and Choice in the Last Days of Life”

“Brings needed hope and comfort to those who are near death and to those who attend the dying and are responsible for ensuring that a good death is possible. The book will appeal to patients, their families, and their caregivers. A fascinating book, rich with clinical stories. Gently and compassionately written” (Journal of the American Medical Association).

by Sidney Wanzer and Joseph Glenmullen, Da Capo Press, ISBN 978-0738211633

Film

“The Suicide Tourist”

Oscar[®]-winning Director John Zaritsky's empathetic documentary on the right to choose time and place of one's own end of life.

www.thesuicidetourist.com

Press

“Inside the Dignitas house” in “The Guardian” 18 October 2009. Article online:

www.guardian.co.uk/society/2009/nov/18/assisted-suicide-dignitas-house

Information on the costs associated with an accompanied suicide with DIGNITAS.

1) Preparation of an accompanied suicide

Several significant administrative expenses are incurred by DIGNITAS when making the arrangements for an accompanied suicide until the “provisional green light” is given (= a medical doctor gives basically approval to a member’s request for a prescription, yet reserves his or her definite decision until a personal consultation). Based on the DIGNITAS statutes, members are asked to pay **an additional contribution of 3’000.- Swiss Francs (approx. GBP £ 2’250 / US \$ 3’600)**, which must be settled in advance. However, no guarantee of an accompanied suicide can be linked to this payment.

2) Doctor’s consultation

Further costs will be incurred because a Swiss medical doctor who co-operates with DIGNITAS must be involved to meet a member and subsequently write the prescription for the drug. Two extended consultations with the physician cost **an additional contribution of 1’000.- Swiss Francs (approx. GBP £ 750 / US \$ 1’200)**.

3) Costs for completing an accompanied suicide

Costs (such as the fee paid to the person acting as an escort/helper, a contribution towards the cost of the DIGNITAS apartment and so on) are also incurred by DIGNITAS. In order to cover these costs and to maintain the quality of this service, DIGNITAS is compelled to ask for **a further contribution of 3’000.- Swiss Francs (approx. GBP £ 2’250 / US \$ 3’600)** for the completion of an accompanied suicide.

4) Funeral and registry office expenses

If a person dies in a DIGNITAS apartment in Switzerland rather than in their own home the charges levied by funeral directors are higher. Cremation in Switzerland is generally recommended and the urn containing the ashes can be sent on without difficulty.

The costs for the services of the funeral director including a cremation normally come to

2’000.- Swiss Francs (approx. GBP £ 1’500 / US \$ 2’400), including charges payable to the relevant Swiss authorities and the cost of despatching the urn.

On request, DIGNITAS can also take care of the **official procedures** following a death in Switzerland. **This separate service incurs an additional contribution of 1’500.- Swiss Francs (approx. GBP £ 1’125 / US \$ 1’800)**, to cover expenses.

Upon agreeing on a date for an accompanied suicide, the member will receive a pro-forma invoice detailing the additional payments he or she is required to make. An accompanied suicide can only be completed if DIGNITAS is confident that all of the costs and expenses incurred will be met. **Consequently, DIGNITAS normally requires advance payment. The total payable is 10’500.- Swiss Francs (approx. GBP £ 7’875 / US \$ 12’600) if DIGNITAS is asked to make all the necessary funeral and administrative arrangements; or 7’000.- Swiss Francs (approx. GBP £ 5’250 / US \$ 8’400) if DIGNITAS is not required to take care of the funeral or administrative/official affairs.**

If a member has paid more than the minimum membership contributions during their membership of DIGNITAS, any surplus may be deducted from the advance payment.

Therefore, in the interest of proper accounting procedures, members are invoiced accordingly for these separate services and the invoices must normally be settled in advance.

The DIGNITAS statutes make provision for a reduction of (or even complete exemption from) membership fees for members who live under modest economic circumstances: this provision also applies to the additional contributions associated with preparing and completing an accompanied suicide. However, it is essential that any reduction of or exemption from contributions is discussed and agreed beforehand between the member and DIGNITAS.

Declaration of membership *Please use **BLOCK CAPITALS***

I hereby enrol as a member of “DIGNITAS – To live with dignity – To die with dignity”:

Male Female

First name(s):

Surname(s):

Street:

Town and postal code:

Date of birth:

Place of birth:

Profession:

Telephone: Private Business:

Fax: Private Business:

Mobile Telephone: E-mail:

Nationality:

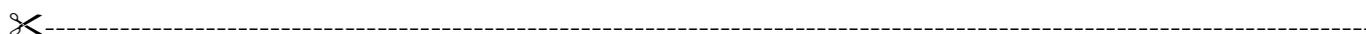
For Swiss citizens only: Bürgerort: AHV-Nr.:|.....|.....|.....|.....|

My preferred language: ENGLISH FRENCH GERMAN ITALIAN

One-off joining fee CHF 200.—; minimal annual fee CHF 80.—

Date: Signature:

.....



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Profession:

Telephone: Private Business:

Fax: Private Business:

Mobile Telephone: E-mail:

Nationality:

For Swiss citizens only: Bürgerort: AHV-Nr.:|.....|.....|.....|.....|

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