



Archdiocese of Vancouver  
ARCHBISHOP'S OFFICE

St. Jane Frances de Chantal  
August 12, 2016

Reverend and dear Father:

As shepherd of over 400,000 Catholics in Greater Vancouver and the Lower Mainland, and in view of the Supreme Court of Canada decision of February 6, 2015, and the recent legislation enacted by Parliament concerning **euthanasia** and **assisted suicide**, now termed MAiD, I am writing to offer some clarity concerning the Catholic Church's teaching in this matter.

- 1) We maintain as a fundamental principle that any action or omission which of itself or by intention causes or hastens death is a grave violation of the Commandment: "You shall not kill."
- 2) Consequently, no one may be pressured or coerced to accept any such action or omission; nor may any health care practitioner be pressured or coerced to cooperate in such an action or omission.
- 3) We hold equally firmly that, while every person has a fundamental right to normal care and treatment, he or she has also the right to refuse procedures or treatments considered "extraordinary" or "disproportionate"; that is, overly burdensome, painful, or of dubious effectiveness in restoring health. Likewise, the individual has the right to discontinue treatment under the same conditions.

Occasionally there is the false impression that the Catholic Church teaches that one must sustain and prolong life under all circumstances and at any cost. Just as respect for the human person demands the utmost care of the sick, so the same respect urges avoiding the imposition of treatments that are overly burdensome, unnecessary or futile. As a general principle, if a person's condition was such that it was legitimate to not administer a particular treatment, it would be equally legitimate to discontinue the treatment when it is judged to be futile, even when it is foreseen that death will follow.

- 4) Nutrition and hydration are to be considered “ordinary” treatment; they can be discontinued only when the body is no longer able to receive or process food and water. To allow a person to die of starvation or dehydration, rather than of his/her illness, would be a form of euthanasia.
- 5) For those in the final stages of a terminal illness the Church is a strong advocate for palliative care. We applaud the progress that has been made in the field of pain alleviation and management. While acknowledging the human and redemptive value of suffering, we also recognize our common human responsibility to bring relief to suffering wherever possible. Thus, in palliative care it is always legitimate to administer medication in doses adequate to control the pain, even if it is foreseen that death will be hastened, so long as the intent is to alleviate the pain, and not to hasten death.
- 6) The conscience of caregivers, physicians, nurses and support staff must always be respected. No one may be subjected to discrimination because of conscientious objection either to MAiD or to effective direct referral.

I hope that this letter may serve to clarify matters whenever questions arise from either health care professionals or patients about what the Catholic Church teaches regarding euthanasia and assisted suicide.

With cordial best wishes and gratitude for the loving attention given to the patients entrusted to your care, I am

Fraternally yours in Christ,

A handwritten signature in black ink that reads "J. Michael Miller CSB". The signature is written in a cursive style with a cross symbol at the beginning.

✠ J. Michael Miller, CSB  
Archbishop of Vancouver