

EDITORIALS

See Zurich and die?

Reality TV crosses new boundaries

On 20 January a British man with advanced motor neurone disease ended his life in Switzerland with the help of a group called *Dignitas*. Reginald Crew aged 74, a retired car worker from Liverpool, is thought to be the second such Briton to visit this controversial 'clinic' in Zurich. His £50 fee covered a consultation and a drink lethally laced with barbiturates. An ITV crew from *Tonight with Trevor McDonald* accompanied him and his wife Wyn to film all but his last hour. What are we to make of it all?

Euthanasia is defined as 'the intentional killing by act or omission of a person whose life is felt not to be worth living'. Assisted suicide is euthanasia one step back. Few of us can see any morally significant difference, and although a BMA conference in 2000 was at one stage expected to recommend a change in law, BMA policy remains firmly against it.

Switzerland has allowed assisted suicide since 1918 provided it is motivated by altruistic considerations. The rest of us have rightly asked the question: how could we ever be sure of the motivation when the key witness, the person the police would most like to interview in order to confirm this, is dead? Switzerland ignores this question and interestingly, unlike the Netherlands, Belgium, and Oregon, has not required the involvement of health professionals. Any altruistically motivated person can help kill and the patient does not have to be terminally ill.

This curious state of affairs had passed virtually unnoticed until British lobby groups cynically upped the profile of the euthanasia debate. Fearing adverse publicity about 'suicide tourism' – numbers grew from three in 2000 to 55 in 2002 – the Swiss parliament has introduced a bill to end the tourism aspect but that cannot become law until end-2004. Disability groups in the UK have vehemently condemned the hopelessness conveyed by such TV coverage. Palliation of motor neurone disease is difficult, but we do not need to kill the patient in order to kill the symptoms, and we can bring hope.

Meanwhile Merseyside police are considering prosecution. I would leave Wyn Crew alone. Her distress was obvious: 'It's like taking him out to be shot at dawn'. But the other crew worries me more. Reality TV may rack up ratings but until they show medical killing in abortion, they should not show the prelude to medical killing in such a propaganda piece.

Andrew Fergusson

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Reginald and Wyn Crew

The future of higher education *There is much in the Bible about debt*

The Future of Higher Education white paper¹ proposes radical reform of university funding in England and Wales. Up-front tuition fees will be abolished and instead, universities will charge up to £3,000 per year of a course, to be paid after graduation when the student earns over £15,000.

Education Secretary Charles Clarke said: 'They [universities] will be given the right to set their own fees and therefore be given a market incentive to provide the best courses for students and the economy'.² The government will pay fees up to £1,100 per annum for students whose family income is under £10,000, and reintroduce a grant of less than £1,000 per year for students with a family income under £20,000. Medical students will have access to means-tested non-repayable bursaries in years five and six.³

Medical students already leave university with an average debt of £13,000.⁴ Under the proposed changes Mr Clarke estimates that the average debt after a three year course could be £21,000. Medical students may therefore emerge with double this burden and this could discourage applications. Dr Colin Smith, Chairman of the BMA's medical academic staff committee said: 'The Government is struggling to recruit the extra doctors to the NHS yet its plans for higher education will penalise a workforce that they desperately need'.⁵

Although there is no biblical mandate for free education, as Christians we should be concerned about any policy which may deter those from low-income families from applying because of cost, keeping medicine as an elitist career. Universities have improved access for such students and it would be unfortunate to see this reversed. Introduction of these new fees could further promote a debt culture among students, and also add to the already great pressures facing junior doctors starting work.

Debt in the Bible is permissible, not ideal. Loans in Israel were charitable and given to help a countryman through a period of poverty.⁶ It was not permitted to charge interest,⁷ except to a foreigner,⁸ and debts had to be cancelled every seven years.⁹ Jesus extended this, commanding Christians to lend to their enemies and to those possibly unable to repay them.¹⁰ Should this paper be accepted by parliament, an incentives scheme to encourage universities to raise funds through endowments will be instituted. Perhaps we as salaried doctors should consider relieving the financial burden on our student colleagues by setting up such endowments. The consultation process for this white paper is open until 30 April 2003; please consider raising these concerns with your MP or writing to the consultation unit.¹¹

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1. www.dfes.gov.uk/highereducation/hestrategy/pdfs/DFES-HigherEducation.pdf
2. From Charles Clarke's press release on the white paper www.dfes.gov.uk/pns/DisplayPN.cgi?pn_id=2003_0008
3. DFES spokeswoman quoted in *BMA News* 8 February 2003
4. Survey of Medical Students' Finances 2001-02 www.bma.org.uk/ap.nsf/Content/medstudentsfinance02?OpenDocument&highlight=2,student,finance
5. BMA press release 22 January 2003 www.bma.org.uk/ap.nsf/Content/medstudentsfinance02?OpenDocument&highlight=2,student,finance
6. Leviticus 25:35
7. Exodus 22:25; Leviticus 25:36, 37
8. Deuteronomy 23:20
9. Leviticus 35:8-55
10. Luke 6:32-36
11. Consultation Unit, Department for Education and Skills, Area 1D, Castle View House, East Lane, Runcorn, Cheshire, WA7 2GJ or e-mail hestrategy@dfes.gsi.gov.uk