Paul deParrie

Attorney Russel Van Camp, a rescue attorney, represented Ryan and his parents in getting a court order to resume treatment.

Paul deParrie

Ryan's father also is alive today because of a helicopter flight.

was nowhere near as bad as Sacred Heart had represented it. The baby was successfully taken off the ventilator on December 14 and was reported to have passed urine — an indicator of kidney function.

"He has passed urine on his own," said Karen Waske, Nurse Manager of Neonatal Care at Emanuel in a December 15 interview. "We would not have expected this with the history as given by Sacred Heart."

A defensive Sacred Heart told the press that Ryan would live only five to seven days without dialysis — despite his having survived the 13 days off dialysis that they had put Ryan through.

Dr. Johnny Cox, Sacred Heart's ethicist (see sidebar), who has become well known as a pro-death apologist according to Teri Van Camp, said, "We strove to provide all lifesaving treatment for this child until it became clear it was futile."

However, the treatment provided by Emanuel proved that efforts on Ryan's behalf were not "futile."

Dr Jenkins said, "The baby kicks around, looks at people, gazes at people. I can't ethically not do dialysis on somebody like that."

The Nguyens claim that Sacred Heart had botched the delivery of Ryan and were motivated to see Ryan die because they feared begin saddled with the costs involved.

"There are a few hurdles we have to face," said Emanuel's Dr. Jenkins. "If we can get over those hurdles, then I think we're in good shape."

One of the major hurdles was a December 16 surgery to repair the bowel obstruction. Tense hours passed as the troubled child was worked on by the team at Emanuel.

But, more than a success, the surgery was followed one day later by the removal of the dialysis machine which had been Ryan's constant companion — except when Sacred Heart had removed it as a means of bringing about his death. Ryan's catheter was removed and brain scans showed no sign of brain damage that was claimed by the Spokane hospital.

A day later, Ryan was taken off his ventilator.

Since then, doctors have said he may be able to go home sometime in February and that he may not need a transplant.

"Sacred Heart chose death," said Attorney Russell Van Camp. "but I chose life." ■

God speaks on . . .

ABORTION

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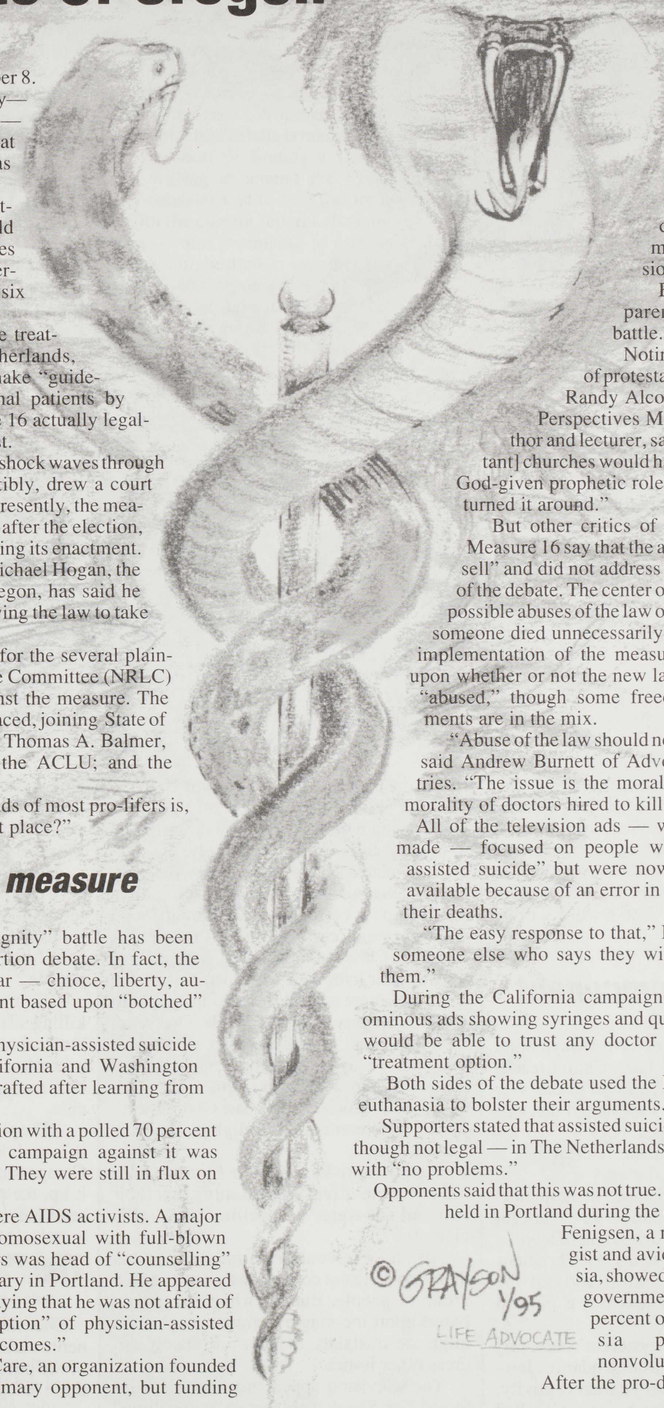
Deadly physicians: Death with "dignity" in the State of Oregon

by Paul deParrie



Things are different since November 8. For the first time in modern history— and in the first place in the world — assisted suicide became legal on that date in Oregon. Pandora's box has been opened.

By a slim majority, Oregon voters passed Measure 16 which would allow doctors to prescribe lethal doses of "medication" to patients determined to be "terminal" within six months.

Unlike the blind eye of Justice treatment of euthanasia in the Netherlands, Oregon's law does not merely make "guidelines" under which killing teminal patients by doctors will be tolerated; Measure 16 actually legalizes the process. A worldwide first.

The passage of the measure sent shock waves through the pro-life world — and, predictibly, drew a court challenge to its constitutionality. Presently, the measure, to have been enacted 30 days after the election, is under a court injunction prohibiting its enactment.

Federal District Court Judge Michael Hogan, the only federal judge in Eugene, Oregon, has said he wants to hear the case before allowing the law to take effect.

James Bopp, Jr., lead counsel for the several plaintiffs and the National Right to Life Committee (NRLC) has lead the charge in court against the measure. The usual gang of opponents have surfaced, joining State of Oregon Deputy Attorney General Thomas A. Balmer, in vigorous oppsition to Bopp; the ACLU; and the Hemlock Society.

But the real question in the minds of most pro-lifers is, "How did it get this far in the first place?"

The origins of the measure

The so-called "death with dignity" battle has been raging almost as long as the abortion debate. In fact, the arguments themselves are familiar — chioce, liberty, autonomy. There is even an argument based upon "botched" suicides.

Prior to the Oregon initiative, physician-assisted suicide measures had failed in both California and Washington states. The Oregon version was crafted after learning from the "mistakes" of the other two.

The measure began its incarnation with a polled 70 percent plus support, but soon after the campaign against it was initiated, those numbers plunged. They were still in flux on the day of the vote.

Chief among the supporters were AIDS activists. A major spokesman was Tim Shuck, a homosexual with full-blown AIDS who, for more than 20 years was head of "counselling" at the Lovejoy Surgicenter abortuary in Portland. He appeared in both local and national media saying that he was not afraid of death and hoped to have the "option" of physician-assisted suicide available "when the time comes."

Coalition for Compassionate Care, an organization founded to fight Measure 16, was the primary opponent, but funding apparently came mostly from the Catholic Church which raised money during church services to fight what its bishops called a "cancer." Much of the money went to television ads.

But the Catholics apparently waged a lonely battle.

Noting the obvious absence of protestant churches in the fray, Randy Alcorn, director of Eternal Perspectives Ministries and noted author and lecturer, said, "If Oregon [protestant] churches would have taken seriously our God-given prophetic role, we could easily have turned it around."

But other critics of the campaign to stop Measure 16 say that the ads were both too "soft-sell" and did not address the moral components of the debate. The center of the campaign was the possible abuses of the law or mistakes made where someone died unnecessarily. Even the suit against implementation of the measure is primarily based upon whether or not the new law's provisions can be "abused," though some freedom-of-religion arguments are in the mix.

"Abuse of the law should not have been the issue," said Andrew Burnett of Advocates for Life Ministries. "The issue is the morality of suicide and the morality of doctors hired to kill."

All of the television ads — which were very well-made — focused on people who "might have used assisted suicide" but were now glad that it was not available because of an error in diagnosing the time of their deaths.

"The easy response to that," Burnett said, "is to get someone else who says they wish it was available to them."

During the California campaign, opponents presented ominous ads showing syringes and questioning whether one would be able to trust any doctor once death became a "treatment option."

Both sides of the debate used the Dutch experience with euthanasia to bolster their arguments.

Supporters stated that assisted suicide had been allowed — though not legal — in The Netherlands for more than 20 years with "no problems."

Opponents said that this was not true. In a bioethics syposium held in Portland during the campaign, Dr. Richard Fenigsen, a retired Dutch cardiologist and avid opponent of euthanasia, showed figures from the Dutch government that more than 50 percent of the reported euthanasia practice was on nonvoluntary patients.

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LIFE ADVOCATE

After the pro-death victory, the State