An
Exit International
Publication

eDeliverance

A PEACEFUL DEATH IS EVERYBODY'S RIGHT





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Diary Dates

MELBOURNE CHAPTER

Statewide Zoom Chapter Meeting @ 2.30pm, Monday 18 December Contact Lawrence for details

SYDNEY COFFEE & CHATS

Wed 6 Dec, Thurs 4 Jan, & Fri 19 Jan
Contact Russell for details

LONDON UK CHAPTER

Chapter Meeting @ 12-2pm, Wed 24 Jan, Contact Sean for details

NEWCASTLE CHAPTER

Chapter Meeting @ I-3pm, Thursday I5 Feb, Contact Ruth for details

IT'S MY CHOICE

With all the emphasis lately on Switzerland, some may be thinking that Exit has lost its focus on DIY self-help. Nothing could be further from the truth. This is why.

Exit fully acknowledges that some Exit members would prefer to enrol themselves in a professional end of life assistance program in Switzerland.

Based on our experience to date, the principal reasons for this include: failing to qualify for end of life laws at home (eg. not being terminally ill with < six months to live), not wanting to involve family/ friends, wanting to avoid putting family/ friends at legal risk, liking the idea of one final hurrah trip and last, but certainly not least, not trusting oneself enough to 'not stuff it up'.

Exit's focus is, and always has been, to ensure that our members have the ability to decide for themselves the circumstances of their death. If this means a trip to Switzerland so be it. If this means staying home and dying in one's own bed we support this too.

In order to make the latter a reality, Exit provides the best and most upto-date information via updates to the Peaceful Pill eHandbook.

Topics covered this year as Updates have included: changes concerning the purchase of sodium nitrite, the professional lab testing of Nembutal, the new De-Breather, the reclassification of some of the Benzodiazepines, new sources of over-the-counter Nembutal in Sth America, the demise of Max Dog Brewing, Sarco progress, Exit's new Swiss programs, new information on Detergent deaths and, finally, the use of Nitrogen for a hypoxic death.

With the Peaceful Pill Handbook on hand, it should not be necessary to 'outsource' one's death in another

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Image Credit: ChatGPT (LOL)



Exit Podcasts Return - Update on the 'Kenneth Law Controversy'

In November, the Exit Podcast series finally resumed. During the pandemic, Philip Nitschke and Fiona Stewart recorded a year-long series of monthly podcasts. Since this time the initiative has largely fallen by the wayside. That is until now.

The first podcast presents an update of the sodium nitrite controversies involving Canadian man, Kenneth Law. Law was charged after a *Times* of London sting-operation revealed an online sales operation where Law would mail-order sodium nitrite around the world. It seems Law sold SN indiscriminately. It was here that he became unstuck. Too many of his customers were young people. Too many irrational suicides were the result. The authorities finally acted.

While many elderly Exit members have drawn great comfort from Kenneth Law's supply of sodium nitrite, the controversy has been over youth suicide. Had Law been more discerning in his sales, would the situation have been different?

At the current time Law is in custody in Canada awaiting a trial. The media has recently reported that the trial has been postponed until 2024. At the time of writing Law is linked to 120 sodium nitrite deaths globally. Exit podcasts can be heard at: https://www.peacefulpillhandbook.com/

Click on the Exit 'Podcasts' link or wherever you get your podcasts: eg. Apple, Spotify etc.



It's My Choice: cont

country. If one has the right information and can obtain the right substances, in the right amounts, (or other necessary equipment, eg. a nitrogen cylinder) then the ability to die at home becomes a reality.

Yet 2023 has proven that it is not always easy (or possible) to obtain what is needed for a DIY peaceful and reliable death at home. Take sodium nitrite as an example. While two years ago, this lawful substance was readily available online (it could even be purchased on Amazon), today it is a precious commodity.

Following the likes of Kenneth Law (who sold SN online in a fairly indiscriminate manner, ie. to young and old alike), we have seen the availability of SN radically curtailed. In many countries the purchase of sodium nitrite is now only available to companies: an apparent safeguard measure.

This is, in part, why Switzerland remains an important destination. The Sarco device is another reason. Only in this country under their unique *Criminal Code*, can a Sarco lawfully be used. This keeps Switzerland on the Exit map: although we expect Sarcos to be part of the future right to die landscape in more than just this country.



Going to Switzerland: How to Plan your Final Exit

Going to Switzerland: How to Plan your Final Exit is a new Exit book by Drs Fiona Stewart and Philip Nitschke.

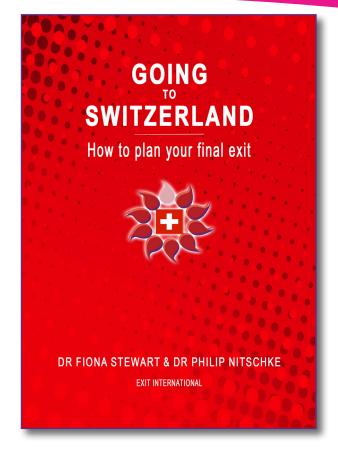
The option of *Going to Switzerland* for an assisted suicide never sat comfortably in the contents page of the *Peaceful Pill Handbook*. This is because the *PPH* is about DIY self-help methods that do not require the reader to leave home. It seemed sensible to create a new, stand-alone publication for the 'Swiss Option'.

Recognising that many people are interested in the idea of an assisted death in Switzerland, this practical guide draws on Exit's extensive experience in dealing with the various Swiss clinics over a long period of time.

The Book Contents include:

- Swiss law
- Differences between clinics
- How to apply
- What documents are required
- Issues concerning capacity
- Mental health issues & depression diagnoses
- Couples who want to go to together
- What to do if you have early dementia
- Where to stay & when to travel
- Visas & immigration
- Who gets the 'green light'
- What happens before, during & after a death
- How do you tell family/ friends
- Costs, cremation, death certificates

The book also discusses, in detail, Exit's **Application Assistance and ID Programs** which are managed by Sean Davison. Starting in December, Sean will be joined by Cordula, a Swiss native who is a public health graduate from the University of Auckland and a long-time supporter of the assisted suicide provisions made possible by Swiss law. Cordula brings to Exit an extensive professional background of working with cancer patients. We are so pleased to have her join our Exit team.



Of the first six months of Exit's Application and ID Programs, Sean says that it has been a 'rewarding time'. Sean's ability to liaise directly with various Swiss organisations has led to the application process for many being streamlined, ensuring that the VAD can go ahead without hiccups. Only once has a person attended a clinic for a VAD and 'walked out alive' says Sean. (Exit had not been involved with his paperwork.) 'There is a lesson here' says Sean. 'With Exit's involvement you can rest easy that your t's will be crossed and your i's dotted. Never forget, the Swiss are very precise'.

Going to Switzerland: how to Plan Your Final Exit is published in online and print formats. As with the Peaceful Pill eHandbook, the online edition is continually updated and improved as situations and practices change.

See: www.exitswitzerland.com or call 1300 10 3948 (AU) or +1 360 961 1333 (US) for a print order form.



De Volkskrant - Profile on Philip Nitschke (edited English translation)



As founder of Exit International, Philip Nitschke fights for access to information about a gentle, self- chosen death. "I think every adult with common sense is entitled to that."

On his idyllic houseboat near Haarlem, Australian Philip Nitschke (75) sits on the couch in his very old jeans with rips on both knees. He is a doctor and a physicist with a PhD, specializing in laser physics. But actually he has been working on a completely different subject for years: the soft, self-chosen death.

He has just told about his latest invention: the Sarco pod, a futuristic capsule in which people with a death wish can lie down and press a button. The capsule is then filled with nitrogen gas and a painless death follows within five to ten minutes. At least, that's the idea.

"Soon I'll lie in it and turn it on," says Nitschke, "to feel if that gas isn't too cold."

"I'm not crazy about this idea," says his wife Fiona Stewart, who serves coffee and cake.

"I'll bring an oxygen mask," says Nitschke.

Stewart: 'When I first met him, he once put a plastic bag over his head to test how quickly the oxygen level went down. It freaked me out .'

Nitschke grins. "We have a huge waiting list for the Sarco," he says.

In the coming hours, Nitschke will tirelessly explain why he fights for the people who call, email and text him almost every day. "Everyone only wants to know one thing," he says. "What should I take to make sure I die, and where can I get it?"

Have you ever provided lethal drugs yoursel? 'No. I cannot do that. I can make sure someone knows how to get it. But in the end, people have to do this themselves. You can't expect other people to kill you.'

Why not? It's their decision, not mine. Choose an injection or a drink for euthanasia in the Netherlands. More and more people are opting for the injection. I think they like the doctor doing it. As if he approves, as if death is a shared responsibility. I'm in favour of a drink.'

Are you ever tempted to help in distressing cases? 'We don't do it, but it sometimes happens in the network. During a workshop in London, a participant stood up and asked: Does anyone have any leftover suicide powder? Another visitor shouted: yes, I have a kilo at home. I intervened.

The full article by Maud Effting and Haro Kraak can be read in English on the Exit website homepage.



GUEST EXITORIAL with Fiona Stewart & the Exit Team

Hello from the Exit Team

Dear Exit Members, we hope you are all safe and sound, as we close out another year. While you have never heard from me (Fiona) directly, Philip asked that I put some words down thinking that it might be interesting for you to hear from the team behind him. Our team includes Kerri, Amanda and Kay in Australia, Sean in the UK/ Switzerland, Matteo, Tesse and myself in Europe, and Sarah and Jurgen in Nth America.

This year marks 20 years that Kerri, Amanda and myself have worked as a small close-knit group to support Philip in his leadership role at Exit. It says much of Philip's way of operating that we have been happy working away in the background, much of this time across different continents and time zones.

But working at Exit has always been more than just a job. It is a way of life. We have almost always worked remotely (long before this became the trend). In some ways, this 'together but apart' has helped keep us all on track.

The one thing we all love about being part of Exit are the incredible people that we meet, both face-to-face and via the huge number of emails that come daily into our in-boxes. We are often privy to people's most private thoughts on this most important issue: the good death.

It is hugely satisfying when we hear that our small input has made a difference to someone's peace of mind, or their plans for the future. We are here to listen and to point people in the direction of the information or advice that they seek. We understand that sometimes things can be urgent. This is why it is par-for-the-course to answer emails and, often, phone calls on weekends.

So, on behalf of us all, we would like to say 'thank you' to our hard-working and dedicated Chapter

Coordinators, as well as to all our members. Thank you for continuing to support the work of Exit International, and for your trust.

Nitrogen Hypoxia & Capital Punishment - what is the fuss all about?

In recent months it has been reported in the media that the US State of Alabama is soon to trial the use of nitrogen hypoxia in their capital punishment regime. The plan is to use a facemask to pump nitrogen into the prisoner's nose and mouth, thereby depriving him of oxygen.

In *The Peaceful Pill Handbook*, we have long warned against the use of a facemask when it comes to a peaceful hypoxic death. This is because of the risk of atmospheric oxygen leaking in and frustrating the process. When a person loses consciousness, the contours of their face change. Even the smallest leak can render a person brain damaged, rather than deceased.

So when you next read about this new American capital punishment regime, be assured that the planned protocol has little relevance to the nitrogen hypoxia approach that we outline in the *PPeH*. For the time being, at least, it is the plastic Exit bag that will provide a peaceful nitrogen hypoxic death. If the thought of a plastic bag on your head is 'below your dignity', then this method is not for you, so move on.

Finally ...

As some of you may know, Kerri Dennis is currently undergoing treatment for breast cancer. We all want to take this opportunity to wish her all the best. The initial surgery has been hailed as successful. However, if anyone is experiencing a late receipt or a missed email, this is perhaps why.

We are thinking of you, Kerri





Report from Ireland: Tom Curran calls for 'Marie's Law'

Exit Directors Philip Nitschke and Tom Curran have now both appeared before the Irish Oireachtas (parliamentary) Committee on Assisted Dying.

Tom's appearance took place on 10 October. Philip's appearance was rescheduled to 28 November.

Despite holding great hopes that Ireland would 'do it differently' and would learn from the mistakes of countries such as Canada (which is winding back its so-called 'safeguards' to ensure that their law is 'fit for purpose'), the Irish seem intent to adopt the most conservative of medical models.

This gloomy outlook is one reason why Tom Curran has recently started a 'Marie's Law' campaign.

What is Marie's Law?

In 2012, Marie Fleming (Tom's partner) brought a case of discrimination in Ireland's High Court and later in the Constitutional Court. Marie's claim was that she was too disabled (with MS) to suicide and, because Tom could not legally help her (do something which was lawful), she was being discriminated against.

While Marie lost her legal argument, the Court commended her bravery in bringing her case forward. Despite this, in the current discussions of what type of legislative model would best suit Ireland, the likes of Marie are being ignored.

Any argument that privileges terminal illness over any other type of suffering will immediately discriminate against those with MS (and all other conditions that have a highly indeterminate prognosis, not to mention a straight physical disability such as quadriplegia) or, simply, old age. To see the debate highjacked like this has angered and hurt Tom Curran, given his long involvement in the issue in this country.

What is worse, is that Tom feels that his pleas for change are falling on deaf ears.

In the course of his presentation at the Joint Committee, Tom called for a Swiss style law to be considered. He noted how little the Swiss Criminal Code (which allows altruistic suicide) is discussed.



Philip Nitschke & Tom Curran Oireachtas, Dublin October 2023



Philip Nitschke presenting to the Committee 28 November 2023

Report from Ireland (continued)



This, he postulated, was because the Swiss law works. And it works in a way that is largely devoid of sensationalism, and abuse.

Medical Paternalism

Philip made similar arguments in his session, only to be howled down: not by the Committee members but by a fellow presenter, Dr Gregory Mewett from Victoria. Mewett appeared on video link from Australia and proceeded to take up considerable airtime with his answers. A doctor with a pedestal can be a challenge in any political setting and so it was in this Joint Committee hearing.

Rather than staying on point and talking to his own recent involvement in assisted dying, Dr Mewett tried to use the opportunity to criticise Philip. Philip's statement that it is regrettable that doctors have become powerful gate-keepers in deciding who gets a good death, seemed to touch a raw nerve. It was bordering on comical that Philip's argument was rebuffed by Gregory in such a way, and with such arrogance, that the entire situation became QED.

Disappointingly, Dr Mewett would go on to scoff at the suggestion that the Swiss model deserved a closer look. 'Open slather' he argued. The Swiss model was largely irrelevant, Mewett argued, given most jurisdictions had gone for doctor-controlled assisted dying. When asked what concerned him about the Swiss model, Dr Mewett did not (or could not) say.

Rather than seek any type of redress, Philip thought it better to give the Committee a break. It was getting late and the few members present looked like they wanted to get home. And this raises another point.

There are 14 Members of this Joint Committee on Assisted Dying, yet each time Exit has attended the hearings there has been a bare quorum of three or four Parliamentarians. This minimalist attendance raises questions? Is the Irish Parliament seriously interested in initiating legal reform in this area, or are they just going through the motions?



Tom Curran's Petition to Parliament to Introduce 'Marie's Law' in Ireland (with over 350 signatures)

Another question that needs to be raised is why the world's largest (and most experienced) voluntary euthanasia advocacy organisation - the NVVE of the Netherlands - has not been invited to appear? The tenet of Dutch end of life debate is advanced, sophisticated and reflects more than half a century of activism. It reflects a quarter of a century of legislative experience. It seems that there are parallel universes at play. Surely this can't all be down to the so-called 'language barrier'.

In conclusion, if the Irish Parliament decides to act on assisted dying/ assisted suicide/ voluntary euthanasia (call it what you will), it is unlikely to honour the memory of Marie Fleming in any practical sense with a qualification criterion of 'unbearable suffering'.

While some may say that it is progress for Ireland to simply have this Committee inquiry, what good is it if the mistakes of the past are swept under the carpet? A medical model law excludes more people than it will ever help. More than this, it ignores the changing nature of the modern lifecourse where we live longer, but sicker, lives.

Recordings of Tom (10 October) & Philip's (28 November) presentations can be found at the Oireachtas website at: https://bit.ly/jointcommittee

The Backstory ...



This week, the Federal Court of Australia ruled that 'assisted dying' in this country is nothing other than 'suicide'.

The action was brought by Victorian doctor Nick Carr who was seeking to have voluntary assisted dying (VAD) semantically separated from 'suicide', due to the fact that suicide cannot lawfully be discussed over the phone, email, fax or the Internet. At least not in Australia.

The law that makes such communication an offence, is the Suicide Related Material Offences Act (SRMO Act). The SRMO Act is a 2005 amendment to the Australian Criminal Code. This week's ruling means that 'even' doctors cannot discuss voluntary assisted dying (aka suicide) with their patients. There is no free speech in Australia, nor is there a right to privacy.

But let's take a step back to understand where this law came from and why. The change in law came about in order to ban the online publication that would become the *Peaceful Pill eHandbook*. This week's judgment notes that the amendment was intended to complement 2002 changes to the *Australian Customs Act*.

The *Customs Act* was amended after a visit to Australia by the American pro-life extremist Wesley J. Smith. Smith was, and is, well networked with close links to the editor of *The Australian* newspaper, Paul Kelly and senior (Catholic) journalist Dennis Shanahan.

The Australian went big on its coverage of Evelyn Martens' homemade plastic Exit bags around the world, including to Australia. The Right to Die Society of Canada was put under intense scrutiny in the process.

'The suicide bags' Shanahan wrote are 'reminiscent of the Khmer Rouge's shopping bag executions in Cambodia's killing fields, [and] are mailed directly to applicants in a plain white envelope'.

Under pressure from the Catholic church and prolife lobby, the Howard Government (via Customs Minister Chris Ellison) quietly, but quickly, gazetted changes to the *Customs Act*. Evelyn Marten's Exit bags became an illegal import.

Philip Nitschke came face-to-face with this hitherto unknown change to the Customs law when he was en route to the National Conference of the Hemlock Society in San Diego in January 2003.

Having created a carbon monoxide-generating device called the 'CoGenie', he had planned to unveil the contraption in San Diego. The CoGenie consisted of a series of off-the-shelf PVC plastic pipes and tubes. Determined to enforce this ridiculous new law, these pieces of common plumbing were seized by Customs at Melbourne Airport as Philip sought to leave the country.



Exit members inspecting a CoGenie Sydney, 2003

By its very design, however, the CoGenie was able to be simply and quickly reassembled: which is exactly what Philip did once he got State-side. His keynote speech at the Hemlock Society received a standing ovation. Prime Minister John Howard was not impressed.

It is useful to remember that the French academic, Lisette Nigot, had died two months before. Lisette

The Backstory cont



always said that she 'didn't want to turn 80'. Her death was front page news. Prime Minister Howard said that he was 'appalled'. In political terms, Australia was in a moral panic. Older people were now actively making their own end of life decisions.

Australian Government Moves to Close the Borders

With the borders now closed to physical items that could be used in a peaceful death, the Government turned its attention to digital communication, and the Internet. It was here that the Suicide Related Material Offences Act was born. While Exit was never in the business of end of life counselling over the phone, email or Internet, the then Attorney General, Philip Ruddock, was on a mission on.

The Suicide Related Material Offences Act prevents the use of a carriage service (eg. phone, fax, email and the Internet) to discuss end of life issues. The law is extremely broad. It was intended to make Exit's life difficult.

To begin with, the Peaceful Pill eHandbook would need to be published in the US where it is protected by the First Amendment of the US Bill of Rights. (Australia has no Bill of Rights.)

The 2002 *Customs Act* amendment remains the reason why Australian Border Force, even today, routinely confiscates the print *Peaceful Pill Handbook* on entry to the country.

Back to the Federal Court Ruling

Exit has long maintained that 'voluntary assisted dying' is a form of suicide. Not all suicide is the irrational act of a depressed teen. Some suicide is rational in outlook, and comes about as the result of an informed and long-held decision to end one's life.

Because the term 'suicide' remains undefined in Australia's *Criminal Code*, the Court relied on

definitions contained in the Macquarie and Oxford English dictionaries where it is defined as 'the intentional taking of one's own life' (Macquarie) and 'the action or an act of taking one's own life' (Oxford).

In response to the ruling the Australian Prime Minister, Anthony Albanese has stated that his Government has no plans to change the *Criminal Code*. How pathetic. This from a man who, during the 1997 debate in the Federal Parliament on the overturning the Northern Territory's *Rights of the Terminally III Act* had said:

I oppose this bill because I support human dignity. I oppose this bill because I support freedom of choice.

I oppose this bill because I support civil liberties.
I oppose this bill because my Christian upbringing taught me that compassion is important.
I oppose this bill because modern medical practice

I oppose this bill because modern medical practice should be open and accountable, not covert and dishonest ...

And then he didn't!

NSW VAD Law Begins

This week, the New South Wales VAD law took effect. To qualify for this heavily medicalised law you must be:

- over 18 years
- a resident of NSW > 12 months
- an Australian or a permanent resident
- have mental capacity
- be making the decision voluntarily
- & be diagnosed with an advanced/ progressive disease that will kill you < 6 months (or 12 months if neurological)

There is a 10-step 'request process'. Each step requires the cooperation of a doctor. Make no mistake, the decision lies firmly with the doctors (plural).

See more at: https://bit.ly/NSWVAD



Sarco Report **Colours? Cushions & all those Details**

As the Sarco 3.0 nears completion in Rotterdam, thoughts are turning to the finishing touches.

After much consideration, this Sarco is to be finished in a silver sparkle paint: not quite disco ball, but something that takes inspiration from the Milky Way. The trim will be mauve, as befits an Exit invention.

The interior is currently under design and will be finalised shortly. One pitfall that the team hope to avoid is the flat angle of the interior cushioning: this angle was found to detract greatly from the view from within the purple Sarco.

Get the angle wrong and the view out the windscreen is degraded. The whole purpose of the Sarco is for the user to be able to die in a place of natural beauty. A metaphoric journey to the next world calls for nothing less.

The History of Sarco

It is more than a decade since Philip Nitschke conceived of the Sarco, in an effort to help UK man, Tony Nicklinson who had locked-in syndrome. How hard could it be to design a new machine that allowed the user to instigate their own passing in a manner that was peaceful, dignified and without external help. Some three Sarcos and II years later and the answer to that question is that it is very hard: but it is not impossible.

Exit is excited to be almost at the end of this journey of invention and discovery. The organisation is grateful for the many bequests that it has received over the years that make this type of ambitious Research and Development possible.

Sometimes it has seemed that the project would never be fulfilled. Despite the pandemic setting the project back two years, the wait is almost over ...



The anticipated final colour scheme of Sarco 3.0