

January 24, 2024

Hon. Tim Walz
Governor, State of Minnesota

Hon. Melissa Hortman
Speaker, Minnesota House of Representatives

Hon. Kari Dziedzic
Majority Leader, Minnesota Senate

Via Electronic Mail

Respected Elected Officials,

We write to you today as Muslim physicians in Minnesota about our profound concern with and strong opposition to *HF 1930: A bill establishing end-of-life option for terminally ill adults*, which is essentially a proposal to legalize physician-assisted suicide in Minnesota. We believe that public policy should focus on expanding care opportunities for everyone, including those terminally ill, and not in creating incentives in healthcare delivery that exacerbate existing racial disparities or threaten care for vulnerable populations.

Our Islamic faith plays an important role in why and how we became healthcare professionals. Islam values each human life above everything else. We are taught “to save one life, is to save all of mankind, and to take one life is to take the life of all mankind”. Preserving human dignity in life and death, provide relief from suffering, and support a dying patient with compassion and care while allowing natural process of end of life is something we value. Physician assisted suicide violates the religious values of not just Muslim physicians, but those of many other faiths. It is a bond that unites our values as health care providers. It raises unsettling ethical questions and risks devaluing the sanctity of life. It takes away the ability of a patient to spend their final days surrounded by love.

This bill will undeniably create powerful financial pressures and incentives within the delivery system, particularly at the level of insurance, to offer assisted suicide instead of more expensive treatment options. As in Canada and Northern Europe, the eligible patient populations will likely extend to minors (euthanasia) and those who are not terminally ill, including the poor, marginalized and disabled who have little hope, those who have dementia and Alzheimer’s, and those who depressed or are suffering mental anguish, including those in significant financial and/or medical debt. This is unconscionable. We can do better as a society and provide the care for a dignified, comfortable and natural passage to end of life.

We believe everyone has a right to both receive and refuse healthcare, and no one needs to endure prolonged suffering. Palliative and hospice care services have made important advances. Pain and suffering can and should be better managed. To the extent that there are gaps in access to or training in palliative care or workforce shortages in professions that care for the elderly and disabled, those should be a policy priority.

We would welcome the opportunity to share more with you about our opposition to assisted suicide legislation, as well as work with you on policies that promote better care for everyone, including persons of color and other vulnerable populations.

CC: Hon. Tina Liebling, Chair, House Health Finance and Policy Committee
Hon. Melissa Wiklund, Chair, Senate Health and Human Services Committee
Hon. Zaynab Mohamed
Hon. Omar Fateh
Hon. Hodan Hassan
Hon. Samakab Hussein

Respectfully, on behalf of the physicians listed below,



Bilal Murad, MD

Abdul Hussain Nathani, MD	Ahmad Abdul Karim, MD	Aazim Kamal, MD
Amin Rahmatullah, MD	Asad Irfanullah, MD	Asima Yasin, MD
Ayesha Rashid, MD	Bilal M. Murad, MD	Ehtaisham Mohammed, MD
Enver Khan, MD	Farooqa Jafri, MD	Fatima Batool Khan, MD
Fatima Tiwana, BDS MDS	Haseen Syed, DDS	Hyder Khan, MD
Imtiaz Hussein, MD	Irfan Altafullah, MD	Irfan Sandozi, MD
Irshad Jafri, MD	Mariam Anwar, MD	Muna Irfan, MD
Mustafa Shah Khan, MD	Naheed Murad, MD	Nadia Malik, MD
Naeem Chaudhry, MD	Nedaa Skeik, MD	Reza Khan, MD
Sadia Chaudhry, MD	Saima Ahmer, MD	Sajad Mir, MD
Sani Kizilbash, MD	Sarah Kizilbash, MD	Sabeen Askari, MD
Saira Mitha, MD	Siyab Panhwar, MD	Syed Askari, MD
Unaiza Ansar, MD	Uzma Samdani, MD	Wafa Qureshi, DDS
Zeeraq Rahmatullah, MD		