
Newsletter April 2026

Dear Members,

The cold season is already over, and I owe you all a new newsletter.

The lifecircle association is as vibrant and active as it has been for over a decade, even though certain media outlets are spreading misinformation and causing significant anxiety among our members. In November 2022, we closed the association to new members, but this has allowed us to dedicate even more resources to all our existing members. We provide counselling in cases of illness and unbearable suffering, help members sense the right moment for assisted voluntary death (AVD) when the suffering is no longer bearable for the person concerned, and accompany members with great empathy as they pass away. Our members have the right to a dignified end of life, and they alone determine when they had “enough of life.” I remember constantly Pastor Werner Kriesi, who wrote a treatise titled “Suffering in Old Age.” I am so grateful that in Switzerland we do not need to have a “serious illness” to be allowed to die on our own terms. A Federal Supreme Court ruling confirms that even healthy individuals may be accepted for an AVD if their wish to die is long-standing and well-considered, and the person is of sound mind. Though, I have never encountered a healthy person asking for an AVD. However, we are receiving an increasing number of requests from very elderly seniors who suffer from many non-serious illnesses but are otherwise still quite fit concerning their age. Yet they are tired of life and wish to end it after careful consideration. This is possible in Switzerland despite the restrictive SAMW guidelines, as Swiss law permits it. An important message for all our members: we are still here for all of you and are happy to assist you with advice, support and if needed AVD, regardless of what the newspapers say.

In last year's March newsletter, I wrote that in Switzerland a decision by the hospitals' ethics committee prohibits hospital physicians from offering any form of assistance when a patient wishes to die. Hospitals reject not only assisted suicide but also voluntary starvation, as they aim to save lives and do not wish to facilitate death. Palliative care units, which are increasingly being established in hospitals, are an exception. However, they continue to reject assisted dying 100%. Now, a political initiative in Switzerland has led to a situation where, once this decision takes effect, all hospitals in Switzerland—including palliative care clinics—must allow assisted dying. It is unfortunate that such a decision cannot be reached through dialogue and implemented optimally, but must instead be enforced through political pressure. Psychiatric clinics and prisons are to be exempt from this regulation. I cannot understand this, as psychiatric illnesses can also be incurable and associated with unbearable suffering.

I would like to reiterate my view here: all hospitals should train their doctors in assessing a patient's capacity and in issuing a prescription for a lethal medication, so that those doctors, who are willing to respect a patient's wish to die, can and are permitted to issue the necessary documents without the AVD necessarily having to take place at the hospital, depending on the patient's ability to be transported. As for nursing homes, most have already accepted assisted dying within their facilities.

Unfortunately, Irene Stiefel has decided not to accept the position on the board; she would like to focus on other responsibilities. Since our association has significantly fewer activities, however, it is not necessary to find a new board member. However, if anyone—including non-members—feels called to assist me in planning a lifecircle panel event, I would appreciate hearing from them. A non-member would then be eligible for exceptional admission as a member.

Our Annual General Meeting will once again take place in June, specifically on Wednesday, June 17, 2025, starting at 7:00 p.m. You will receive an invitation and agenda in May. Motions to the Board are always welcome; these must be submitted to mail@lifecircle.ch one month prior to the AGM. 2026 is an election year, and the Board must be re-elected by the members for another three years. If anyone would like to take on a position on the Board, they are welcome to apply for one of the positions using the enclosed form.

I would like to take this opportunity in this newsletter to express a wish: Dr. Uwe Güth, the gynecologic oncologist who is involved in establishing organization-independent centers in Switzerland, is in regular contact with me. He focuses on offering AVD at these centers. I myself have a slightly different vision. Centers should provide advice that is open towards every kind of dying. That means they should not prioritize FTB, but rather all forms of dying. A few weeks ago, I accompanied a very elderly woman to her death through fasting; after 11 days of fasting, she was able to pass away peacefully in her beloved home. Her family doctor, as well as the clinic where she had received medical care for many years, refused to assist with her fasting. She was only able to pursue this path because she got in touch with me through indirect channels. By this luck the path to AVD was open to her, but every person must have the opportunity to find their own way when finishing their life. Information about fasting to die, palliative care, and AVD should be provided equally at a “Center for self-determination at the end of life” (SaL); that would be a real improvement to SaL.

I wish all our members many wonderful moments and a decent quality of life



Erika Preisig,

General practitioner and president
of the lifecircle association