

**“Testimony in support of HB 5326 - An Act Concerning Compassionate Aid in Dying for the Terminally Ill”**

The passage of HB 5326 is important to me because I know that end-of-life care often does include making difficult choices and that, many times, it is not the terminally ill patient himself/herself who makes those decisions. I would like to see this right placed in the hands of the patient to the greatest extent possible.

Both of my parents passed away after long illnesses, and they received medical treatment during the course of their illnesses intended to extend their lives and hopefully restore their health. At a certain point, though, the focus shifted to quality of life, and eventually narrowed down to their getting comfortably through the next day, sometimes even the next hour.

Fortunately, both of my parents had hospice services available to them at the end of their lives, my father in Maine, and my mother in Connecticut. However, even some of the hospital staff were uneasy with certain aspects of their hospice care, which in my mother's case included a morphine IV drip for the last few days of her life. Some people view 'comfort measures' as equal to 'euthanasia'. It has been my observation that those people usually are not the patient.

My mother was not 'euthanized' by the morphine. In fact, she woke shortly before she passed away, and was fully present with us. What the morphine did give her was time, free of pain and fear, for her body to shut down naturally. However, had my sister and I not pursued comfort measures for her, had either of us objected to her being placed on comfort measures, or had my mother been alone and not had family to make the request on her behalf, the hospital would have continued efforts to prolong my mother's life. My mother did not have the right to arrange for comfort measures for herself, in advance of her final hospitalization.

My parents passed away as comfortably and gently as possible, and I am thankful that no one interfered in any major way with their hospice care. But the fact that it could have happened disturbs me. I believe that HB 5326 is a necessary and positive step toward protecting a terminally ill person's right to make his/her own decisions regarding quality of life and end-of-life care. To me, it is frightening that these decisions often are in the hands of everyone else but the patient.

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