

Susanna Thomas MD
HB 5326

Dear Legislators,

I am a family doctor in Old Saybrook CT in practice for 30 years. I am horrified that the Legislature is considering assisted suicide legislation. There so many needs in this state, the despair that many citizens face everyday, being unemployed/ underemployed, unable to provide for their families needs, lack of access to health care and virtually no access to mental health care the list is very very long. I believe that there are actions the Legislature should be taking to help many children in CT , who need your help today ! How assisted suicide is even on the docket is mind boggling.

As a family doctor, I care for patients all through their lives. End of life care, ministering to patients and their families is an important role for every primary care doctor. Knowing my patients and families very well is important in providing this care ; palliative measures , pain management and support. It is a privilege to participate in this part of their lives. Thanks to the advances in pain management, hospice care, community home nursing, patients and their families no longer have to fear the end of life as filled with prolonged, unrelenting pain.It is a time when much healing in family relationships and spiritual growth occurs. The perceived need for" assisted suicide " is contradictory to the reality. Experiencing the loss of function is very traumatic for the individual , their family , friends and their medical providers . Facing cancer, terminal illness of all kinds, dementia, frailty is frightening . The job of medical providers, community care systems already in place , faith communities is to provide support, comfort and relief for these patients and their families. The individual's(and that includes the vast majority of us who will not have a sudden death) dismay at receiving a terminal diagnosis , physical frailty , loss of function is completely understandable. Of course,we do not judge that someone in this situation would want to end their lives to avoid suffering and their families having to witness it.It is,however our responsibility as medical providers , community support systems, faith communities to offer help and support not a lethal intervention .Patients in terminal conditions have a lot to teach us, about living, dying, reconciling . Pope John Paul II graciously allowed us to witness his personal struggle and the frailty of Parkinson disease. I have personally been blessed by many of my patients who in their" end of life " have taught me a lot about living, dying , grace, and faith.

The State of CT needs to do the right thing and put an end to this consideration that devalues and deprives us of the end of life experiences .

Sincerely,

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