

**Testimony in SUPPORT of:
Raised H.B. No. 7015**

AN ACT CONCERNING AID IN DYING FOR TERMINALLY ILL PATIENTS.

To allow a physician to dispense or prescribe medication at the request of a mentally competent patient that has a terminal illness that such patient may self-administer to bring about his or her death.

March 18, 2015

To the esteemed Co-Chairs Senator Coleman and Rep. Tong, Vice Chairs Senator Doyle and Rep. Fox, Ranking members Senator Kissel and Rep. Rebimbas and Members of the CGA Judiciary Committee. My name is Marguerite Johnstone, thank you for allowing me this opportunity to present testimony in support of Raised H.B. No. 7015 AN ACT CONCERNING AID IN DYING FOR TERMINALLY ILL PATIENTS

The end of life is a tender subject and can be very emotional. The probably certain outcome of a diagnosed terminally ill patient is death, unless a miracle occurs. Until death occurs hope is still present no matter how much we accept the outcome. Death is final in most cases. This Bill is addressing those people who are facing a prognosis of less than 6mths to live and are of sound mind, and if the Bill is drafted in the same manor as Oregon's and Washington's laws there is a 30 day waiting period to obtain the Death with Dignity prescription from a participating physician to hasten the probably certain outcome death (it would not be mandated that every CT physician would have to participate in this practice). I support an individuals right to choose who has been

diagnosed with a terminal illness with a prognosis of 6 months or less to live, how they wish to leave this earth, I don't support imposing another's belief systems, practices or judgments of what is perceived as right or wrong on another. The states that offer the option of electing to end ones life under the outlined circumstances do not list suicide as cause of death but the terminal illness. Also, there has not been any significant rise in suicides under the concept of "suicide contagion" as a result of enacting this right to die laws. Below attached are the statics from both Oregon and Washington from their Health Departments, a thoughtful paper expressing the pros and cons of electing to either end or not end ones life and the various options, an article on End of Life Care and a link to an informative website pertaining to Death with Dignity. Please consider the person(s) this law would ultimately apply for an allow them to have another medically safe end of life option, in addition to advanced directives, living wills, hospice and palliative care and if our state adopts a [POLST](#) registry. All those measures have been created to ensure the rights of an individual to indicate how they wish to be treated, if they are not able to speak for themselves and or to create the most comfortable end of life scenarios and or a passive form of euthanasia through sleep/pain inducing medications, adding an active medical and legal sanctioned self-euthanasia would be another care option in the face of terminal illness.

Thank you for your time and please support HB No. 7501.

Respectfully submitted,

Marguerite Johnstone

Stonington, CT

Attachments:

[Oregon's Death with Dignity Act-2013](#)

[Washington Death with Dignity Act](#)

[Moral Issues that Divide Us and Applied Ethics: A Sourcebook](#)

[Baby Boomers want Control of End-of-Life Care](#)

[Death with Dignity.org](#)