

Moniz-Carroll, Rhonda

From: FRANCIS KIERAS <fkieras@sbcglobal.net>
Sent: Saturday, March 14, 2015 3:42 PM
To: JudTestimony
Cc: Sen. McLachlan, Michael
Subject: Assisted Suicide

Now that the Hartford Legislature's attempting to pass a law regarding physician assisted suicide, I offer the following ;

People with illnesses and disabilities could have assisted suicide decisions made for them and imposed on them. In some cases people with illnesses and disabilities may be poorly informed about their condition and prognosis prospects of their future. If patients do not have all of the information available they cannot be expected to make an informed decision about suicide. Patients may be given unclear or misleading information about how long they are expected to live, because healthcare providers simply do not know or may be wrong in their expectations.

It would be difficult to differentiate murders of people with illnesses and disabilities from assisted suicides. The difference between homicide and assisted suicide depends on intentions and other subtle factors that are difficult to prove absolutely.

Illness or disability is no more rational a reason for choosing suicide than any other reason. For example, a convicted murderer of a child may face life and social disgrace and may express a wish to commit suicide. Yet society does not endorse suicide for convicted criminals and takes an active role in preventing suicides in prisons. Why should we label the suicide of such a prisoner as irrational and try to prevent it while we label the suicide of an individual with illness or disability as rational and offer assistance to carry it out?

" Only God is the master of life." We must remember who we are and who we need to be for one another. Assisted suicide is not doing God's work.

Respectfully,

Francis J. Kieras