

## AN ACT CONCERNING END-OF-LIFE CARE. HB5417

*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.*

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Testimony of Francis R. Barillaro

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Dear Members of the Public Health Committee:

Thank you for the opportunity to testify on the topic of HB5417.

I believe that any form of physician assisted suicide is a deliberate, unnatural, unnecessary and generally harmful termination of human life regardless of the physical or mental condition of the patient.

To me, this is not a theoretical issue but a very personal one based on my life with my wife Judith as we journeyed together with her cancer.

During Judith's eleven year journey with cancer there was never a moment no matter how weak or vulnerable she became when she lacked dignity or was treated with anything less than dignity. As we lived together through Judith's times of treatment, pain and growing physical weakness, I experienced her relationship with God intensify, our marriage grow and Judith's relationship with our children and grandchildren blossom.

On May 3, 2015, cancer finally took its toll on Judith's body, but it never defeated her spirit! Judith never stopped growing, never stopped contributing, and never stopped seeing to the needs of others. Our daughter Gina said, ***"As hard as it was for me to literally watch my mom die, I am glad my mom always chose to truly and fully live."***

Because of that journey and in union with Judith I have become a hospice and bereavement volunteer. I also assist as a co-facilitator of bereavement groups. In this work, I have met many people with experiences similar to ours who strongly believe that deliberately choosing to end one's life is not merciful. Rather it, robs the patient and her/his family and loved ones of many opportunities for growth and joy.

Specific reasons why any form of physician assisted suicide is not only unnecessary but injurious to terminally ill patients and their families:

- Advances in palliative care and medicines have alleviated the suffering attributed to end of life illnesses.
- Bereavement services for families are increasingly available.
- Wanting to die because of depression is now treatable.
- In places like Canada and Oregon where physician assisted suicide is allowed, seriously ill patients receive a subliminal message that they should "do the right thing for the next generation". This message alters a patient's natural preparation for death as well as her/his relationship with family and other loved ones. The natural dying process of a loved one also helps their beloved prepare for life after the loved one's death.

Shortly after Judith's entrance into eternal life, I wrote a book about her journey with a goal that it be a source of hope and strength for those living with a serious illness and for their loved ones. During the last three years, I have come to realize that *Judith's Journey* is more than that. It is the perfect example of why the natural dying process is a part of life which should be honored and protected. I have left a copy of the book for you in the Public Health Committee Office.

Thank you.

Francis Barillaro

