Public Health Committee

Testimony in favor of HB 5898, An Act Concerning Aid In Dying For Terminally Ill Patients

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To: 
Co-chairs Daugherty and Steinberg 
Vice Chairs Anwar, Lesser, and Young 
Committee Members

Why should medical aid in dying (MAID) be legal in our state?

The case for MAID does not involve speculation; it comprises facts such as:

- The actual wording of the bill – its definitions, provisions, and restrictions
- The documented experience of the states that already have this law; there are about forty years of combined positive experience in those states.
- Real-life scenarios (or cases or stories) involving real people
- The fact that MAID is a compassionate and rational option. It makes possible a comfortable death that enables the patient to maintain autonomy and dignity, as opposed to enduring a dreadful death and suffering mental anguish while anticipating it.
- The results of national and Connecticut polls targeting (for example) religions, physicians, as well as the general population. They all show roughly 55% to 70% in favor with just one exception: Evangelicals in the southern states.
- MAID helps to make our society a little more sensible about facing and dealing with the inevitability of death.
- It increases the use of hospice and palliative care, probably because, not being preoccupied with dread, people focus on the best way to spend their remaining time.
- The freedom to choose how a person lives – which includes how he/she dies -- is as basic a human right as there is.
- Despite the fact that opponents often take issue with the following fact, the evidence (as opposed to conjecture) is that MAID will affect only those people who are qualified and choose to use it. It has zero impact on everyone else, nor does its existence pose a threat to anyone.

What are the arguments against MAID?

There are too many anti-MAID arguments for me to list, much less discredit, in this letter. So I’ve articulated a few of them in an Appendix that is optional. Here, I’ll just say this:
1. I have read (and heard) a great many of the arguments against aid in dying, and I can either refute them or at least challenge them. By contrast, pro-aid-in-dying points are factual and cannot be rebutted.

2. Most anti-MAID verbiage involves false assertions, speculation, misdirection, and/or fear. And they can give you pause… until a knowledgeable person questions them and reveals their flaws.

3. Many of them describe scenarios that cannot occur under the provisions of the bill.

4. Most of them describe worrisome and hypothetical impacts on “vulnerable” people and society in general. They don’t explain how an aid in dying law would actually cause such harm.

Who opposes MAID?

• The Catholic Church and closely-related organizations

Importantly, I am referring to the clergy, and not to Catholics in general, who favor it (according to polls, even those commissioned by religious organizations). The Church spends much money and devotes much effort to exhorting their members to submit testimony in opposition. Interestingly, most of that testimony is not overtly religious, perhaps because any attempt to impose religious views on others is unacceptable on its face.

• Some disabilities rights groups

Their opposition is emotional and strident, but entirely unfounded. The Connecticut bill expressly states that a disability cannot be a reason to use aid in dying, and the other stipulations in the bill make many disabled people ineligible for aid in dying. Notice that disabilities rights people often refer to their vulnerability and fears and the ways in which society looks to end their lives prematurely. But they never explain exactly how an aid in dying law will cause harm to disabled people. It can’t and it won’t.

Closing Statement

The reasons and need for a medical aid in dying law are real and are based in fact. The arguments against it are not; if you think them through, they don’t hold up.
Appendix -- Rebutting Opponents’ Arguments

Opponents of the aid in dying bill give a great many reasons why it should not become a law. I have selected just a few of them at random and explained why they’re not valid.

Against: Doctors are supposed to heal, not kill.

Rebuttal: Of course. But what should the doctor do when the patient finally cannot be healed? That’s where aid in dying comes into play – not before. Until then, of course patients should get the best possible medical care including reasonable attempts to extend their life and ease their suffering.

Against: Doctors’ prognoses are sometime wrong because patients may survive months or years longer than expected.

Rebuttal: This is a silly argument against aid in dying. Aid in dying patients don’t want to die. When they’ve been interviewed, they bristle at any suggestion that they’re suicidal. If they find that things are going unexpectedly well after six months, they’ll be delighted for the “gift” of an unexpectedly longer life. Incorrect prognoses are a bogus argument against MAID.

Against: There is no need for MAID because people can instead seek palliative care. Drugs such as morphine can be used to eliminate pain.

Rebuttal: It’s not either or. Terminally ill patients who opt for aid in dying are the very people who are most likely to seek palliative care, because they have the peace of mind that comes with knowing that they have the MAID option. They are freed from agonizing over possibilities such as gasping for breath, needing help with all facets of personal hygiene, or being so heavily sedated that you can no longer communicate or think clearly.

Against: Death with Dignity acts are a slippery slope and will lead to euthanasia.

Rebuttal: Aid in dying laws have been in effect in several states for forty years combined. In order to change the scope of any of those laws, it would take an act of the state legislature or approval of a ballot initiative by the voters. At no point has there been any significant effort to expand or extend those laws to allow for euthanasia. There’s been no slippery slope.