

My name is Carol Rizzolo and for 25 years I worked as a Primary Care Certified Physician Assistant. I trained in the 5 boroughs of NY and over the course of my profession practiced in busy city Emergency Departments, Rural Family Practices, and Suburban Pediatrics. I have seen many deaths and rarely have I see a death that one might describe as “a good death.”

Upon retiring from practice I focused on and volunteered for 10 years in Hospice practice. I would go into the room of one who was living at the end of life as a friendly visitor. My role there was to provide the comfort care that only another human being could provide. Every single person who I visited was glad for the visit. Many wanted to speak about their fear of their pain worsening and their concern that when it got so bad that they would not be able to tolerate being alive anymore. Many asked me about the ways that they knew existed for medical aid in dying. Many asked how it could be accessed. Because of the constraints on my professional capacity and later the constraints on me as a volunteer, I was helpless to answer their cries for help. Clinician's hands were tied by so many regulations that even the conversation could not be had with these poor individuals who so desperately were seeking ways to lessen their pain. Patients knew that treatment existed to help them move through to their death with dignity and in their own way. they expressed anger at not being able to make this final choice for themselves. Many wished they could have just died at home surrounded by their loved ones, in their own way.

I was so moved by these stories and by this work that I wrote a book , indeed I wrote a dissertation and completed a PhD with a focus on the time of dying in 21st Century America. My research explored the time of dying as it has been written about in the first person for over 2000 years. All of history and all of historical narratives have the same wisdom: People want to die in their own way. The same as they wanted to live their lives. Making their own choices to live and die in their own way.

We should accept nothing less. No one would want to watch their child die in terrible pain. No one would want to watch their beloved mother or father die in terrible pain. And each of us would want to relieve our own intractable pain given the opportunity. It is a fallacy to say that all pain can be managed. Anyone in the medical field has seen this first hand. Not all pain can be managed.

The time of dying is an important transition that we will all go through. It is nothing less than human dignity to allow each of us to go through that time in our own way.

Thank you, Carol L. Rizzolo, PhD
24 Long Hill Farm
Guilford ,CT 06437
203-464-4451