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To: The esteemed members of the Public Health Committee
Senator Abrams and Representative Steinberg, Co-chairs
RE: [HB-5898](#) An Act Concerning Aid In Dying For Terminally Ill Patients.

My name is Lawrence Rizzolo. I am a Professor at the Yale University School of Medicine, where I have served on many curriculum committees including one devoted to end-of-life care. Along with my biomedical research, I teach anatomy to medical students — an ideal venue to initiate students' exploration of life's end. During the time of Dr. Jack Kevorkian's activities, Yale and many medical schools took it upon themselves to review what we teach our students about end-of-life care. We explored the many psychological, social, medical, economic, and ethical dimensions of palliative and hospice care. We struggled with how to teach the decision-making process of switching from efforts to cure or manage chronic disease to palliative care. A big part of that struggle was to change medical culture to one that accepts palliative care as a legitimate part of healthcare.

This background notwithstanding, the following comments are my own and do not represent the policies or opinions of Yale University. The point I wish to make is that compassionate end-of-life care is also healthcare. It includes empowering patients to consider and act upon how life will end. In fact, HB 5898 is life affirming, as exemplified by the story of my friends, Jane and John (names changed to protect their identity).

John was an architect in his 50's. His wife Jane and I belonged to a caregivers support group so I received weekly updates as the story unfolded. John had ALS. As John's disease progressed, he realized that in the end his mind would be intact, but he would no longer be able to speak, swallow, or control his movements. He did not consider this "living", and worse, he would soon lack the capacity to take his own life. After considerable discussion and difficult effort, John and Jane were able to contact an organization that visited them with the information they sought. John's immediate reaction following that visit was to go out and dig in his garden. Life was restored to him in that moment. Along with fostering the growth of new plants -- new life -- he and Jane were able to resume a loving, playful relationship. The knowledge provided John allowed him to LIVE the rest of his life.

Stories like this are so common. They should no longer be in the shadows. The experience of other States demonstrates that laws can be constructed to prevent abuse. I read the text of HB 5898 and find it provides reasonable requirements and substantial protections against abuse. Healthcare professionals should be enabled to bring us into and out of this life with dignity and compassion. Please vote for HB 5898.

Thank you,

