

FROM:

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RE: Support for HB5898: An Act Concerning Aid in Dying for Terminally Ill Patients

If HB5898, An Act Concerning Aid in Dying for Terminally Ill Patients, becomes law, the right to decide how much suffering dying people must endure will pass from the state of Connecticut to terminally ill people who have a maximum life expectancy of six months.

My friend's husband, who was terminally ill with cancer, wanted his primary care physician to promise to help him die if his pain became unbearable. Because the State of Connecticut denies dying people the right to get aid in dying from a physician, my friend's husband resorted to starving himself to death. Why must terminally ill people resort to such extreme measures?

Another friend's husband suffered horribly after he was exposed to deadly chemicals during an accident at the chemical plant where he worked (in another state). When he got his terminal medical diagnosis, he told his wife that he hoped she would "help him." She understood that he meant that he wanted her to help him die if his suffering became unbearable. In his final days, he was semi-conscious and writhing in pain although he was receiving large amounts of intravenous morphine from a Hospice nurse. His wife told the Hospice nurse to leave the bedroom. Then she put some medication (that she had obtained illegally) into her husband's IV because she knew that this drug would combine with the morphine and end her husband's life. She said into her semi-conscious husband's ear, "I'm helping you now, darling." Why must dying people and their loved ones resort to such extreme steps to end suffering?

Only dying people can define for themselves what constitutes a life that is no longer worth living. In 2016, the dying Oregonians who filled aid-in-dying prescriptions under Oregon's Death with Dignity Act had three major end-of-life concerns: 1) 91.4% feared losing their autonomy, 2) 86.7% feared a decreasing ability to participate in activities that make life enjoyable and 3) 71.4% feared the loss of their dignity. Unbearable pain takes away a dying person's autonomy, ability to participate in activities that make life enjoyable, and dignity. It's not up to the state of Connecticut to deny dying people the right to make such end-of-life care decisions.

Sometimes a dying person will feel comforted and relieved when he/she fills the aid-in-dying prescription. The dying person knows that he/she will be the one who decides how much suffering to endure. This alone can improve the quality of a dying person's life. About 34% of dying people in Oregon who filled aid-in-dying prescriptions never ingested the medication.

Some Connecticut legislators oppose legal aid-in-dying because of their religious beliefs. It is not appropriate for lawmakers to write their religious beliefs into laws that affect many Connecticut residents who don't share those beliefs. HB5898 does not mandate that anyone must do anything that conflicts with his/her religious beliefs. Sometimes individuals' religious beliefs can change when they are coping with their terminal illness or a loved ones' terminal illness. That was the case of a Catholic state senator who testified at a legislative committee hearing in 2015. He supported the aid-in-dying bill because he had felt anguished and helpless during the last week of his terminally ill mother's life when she begged him every day to end her pain by helping her to die.

I hope that you agree that dying people should have the right to choose to end their suffering through a legal aid-in-dying process. I urge you to **vote for H.B. 5898**.