From: Inquiry into End of Life Choices POV eSubmission Form

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Sent: Thursday, 13 August 2015 12:04 PM

To: LSIC

Subject: New Submission to Inquiry into End of Life Choices

Inquiry Name: Inquiry into End of Life Choices

Mrs Lesa Meese



SUBMISSION CONTENT:

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I feel that current medical practices and palliative care do indeed assist a person and their loved ones manage their end-of-life well.

My father lived with us for the last three months of his life with lung cancer, emphysema, asthma, one leg and gangrenous toes on the other.

Instead of him ending his life in hospital, his doctors allowed me to take him into our home for around-theclock nursing care by his loving family and were constantly checking with me that we were managing his many issues well. At one point, we had to call an ambulance and they were on the doorstep before we put the phone down. The District Nurse dropped in every second day and Dad's local GP visited weekly.

It was three months of intense loving, caring and growing in understanding of what it means to be human. Dad knew he was loved and that we were there for him in his greatest need. His enormous gratitude & love was reward enough - although I would have walked over hot coals for him regardless! He lived full days and nights. Visitors came frequently, my children stayed with him after school conversing, learning from his wisdom, enjoying his company, (and vice-versa), admiring his strength of character in his dealing with his mammoth difficulties, practising how to care for others, growing in stamina, guts and determination and learning the meaning of suffering and how to use it to advantage. He contributed greatly to my family and was a profound witness to the heights to which we can attain. Despite the constant demand for oxygen, morphine as needed, physiotherapy, hygiene, dressings, reassuring him when he was struggling and around-the-clock nursing, I would do it again and again- and we are all better people for the experience.

My father lived a death worth living – and I am not living with the guilt of having ignored him or done away with him.....

Improvements in effectiveness, availability, access and how Palliative Care can be given (as in my father's

case), should be offered- not killing.

Pain control is very effective, these days and legalising euthanasia and assisted suicide is an easy way out for a community that has lost the desire to truly love.

There is no adequate way to safeguard the vulnerable from being killed without their consent. Even Advanced Care Directives, which try to address this should be directive not prescriptive. People change their minds and may very well have done so at a point in their lives where they are not able to change their directive though they desire to.

Those who seek euthanasia and/or assisted suicide are often depressed and unwanted. They need to know that they are loved and not a burden. Perhaps then, they wouldn't be seeking death as an option.

Let's look to a positive solution!	
File1:	
File2:	
File3:	