

## Submission to Inquiry into End of Life Choices

I am writing to support legislative change which will provide for the right of terminally and incurably ill people with overwhelming suffering to choose to die with dignity.

We all want to die peacefully in our sleep but that option is not always a natural reality and many people suffer greatly – sometimes for months, before they die.

The practices currently being utilised within the medical community to assist a person to exercise their preferences for the way they want to manage their end of life, are very restricted to be in some cases, non-existent.

I watched my Mother, in the absolute last, profoundly painful stages of cancer, when she had quite clearly indicated that she was ready to die and wanted to, being forced fed – *“because otherwise she would starve to death”*. In those last horrendous weeks when it was clear that my Mother could not survive, I was deeply distressed to think that, not-with-standing that she was in a palliative care situation, this loving, caring and gentle person was denied a dignified and peaceful end.

Currently medical professionals face severe penalties for what is classed as assisting suicide and understandably are reluctant to become actively involved in end of life advice and/or assistance.

For the individual, making provision for a dignified death with informed consent will bring a certain level of comfort in easing the distress of the unknown. Knowing that that option is available does not in itself mean that it will be taken up but it is the knowing that you have the right to exercise that option.

Palliative care is only one part of the whole process and is not and never can be a perfect answer. I would suggest that legalising choice over end of life will not only encourage greater use of more meaningful palliative care but further more research into cures of life threatening diseases.

Being able to talk to your medical practitioner about the options, understanding the risks and knowing what processes must be put in place for your wishes to be carried out will mean end of life decisions are taken with informed consent and not in a haze of fear and distress mixed with emotional feelings of obligation to family and friends.

All medical professionals should have the confidence to carry out the considered wishes of the patient without legal repercussions.

Legislation which will allow qualified medical practitioners to advise patients on end of life issues and to assist them in making informed and reasoned decisions on provision for a dignified death, including safeguards that prevent abuse of the process, is long over due in Victoria.

Margaret B Wilson  
27<sup>th</sup> July 2015