



Feb. 23, 2015

To Alaska Legislators:

Compassion & Choices is the nation's oldest and largest nonprofit organization working to improve care and expand choice at the end of life. Our priorities include making aid in dying an open and accessible medical practice in Alaska and throughout the country. We strongly support An Act Relating To The Voluntary Termination Of Life By Terminally Ill Individuals, (HB 99) to allow medical aid in dying as an end-of-life option and urge the Alaska legislature to pass this important law. This bill will improve the quality of end-of-life care for terminally ill Alaskans and their families, while protecting physicians who care for them.

Medical aid in dying provides peace of mind to terminally ill patients. It allows doctors to write a prescription for medication in response to a request from a terminally ill, mentally competent adult under their care. The individual must, if they choose, self-administer the medication to achieve a peaceful death.

Medical aid in dying is needed because:

- Too many suffer needlessly at the end of life;
- Too many endure unrelenting pain and other symptoms at the end of life;
- Too many turn to violent means at the end of life when medical aid could help them die peacefully.

We want people to be free to choose how they live – and when the time comes, how they die. All Alaskans should have the option, in consultation with their families and doctors, to make the end-of-life decisions that are right for them in the final stages of a terminal illness. These should include the option to request a prescription from their doctor to end their dying process painlessly and peacefully. The Act relating to the voluntary termination of life by terminally ill individuals would give dying Alaskans this important option.

The Alaska bill is modeled after legislation in Oregon and other states where aid in dying has been proven to be good policy and safe medical practice.

- It allows only qualified terminally ill, mentally competent adults to request and obtain a prescription from their physician for medication that they can self-administer to bring about a peaceful and humane death. Two physicians must confirm the diagnosis and terminal prognosis.
- It requires two witnesses to attest that the request is voluntary.
- It protects physicians from civil or criminal liability and from professional disciplinary action if they meet certain requirements in fulfilling an eligible individual's request. Physician participation is fully voluntary.
- It provides safeguards against coercion of patients by establishing felony penalties for coercing or forging a request, and it confirms a patient's right to rescind the request.

Besides Oregon, aid in dying is authorized in Washington, Montana, Vermont and New Mexico. In those five states, people report significant peace of mind, knowing the option is there if they need it.

Brittany Maynard - a California native who suffered severe headaches and debilitating seizures from her terminal brain cancer - had to move to Oregon to access its death-with-dignity law because California does not authorize this end-of-life option. In the final weeks of her life, Maynard partnered with Compassion & Choices to launch a campaign on www.TheBrittanyFund.org to make aid in dying an open and accessible medical practice in her home state and throughout the country. No Alaskan should be forced to move out of state to have a peaceful death. We need a law in Alaska that makes this healthcare option available to those who need and want it at the end of their lives.

National and state polls consistently show the vast majority of Americans across the demographic and political spectrum want to choose their own medical treatment at the end of life. Yet two decades after Oregon voters passed the nation's first death-with-dignity law in 1994, Alaska still has not authorized this end-of-life option.

Expanded options at the end of life would provide Alaska citizens the autonomy they deserve. Studies show patients who receive counseling about end-of-life choices score higher on quality of life and mood measures than patients who do not. Leading national professional medical associations support aid in dying because it empowers physicians to respect their patients' wishes.

The American College of Legal Medicine, the American Medical Women's Association, the American Medical Student Association, the Gay and Lesbian Medical Association and the American Public Health Association all support aid in dying. Each of these groups understands aid in dying is a legitimate end-of-life medical practice. That is, given the protracted dying process that medical technology now creates for Americans, authorizing this practice can spare certain patients from untreatable pain and unmanageable suffering that many now endure.

Courts have upheld this right. In 1997, the United States Court of Appeals for the Ninth Circuit upheld Oregon's first-in-the-nation Death With Dignity Act (passed by ballot initiative in 1994). The law establishes that eligible adults may receive a prescription for medication to end their suffering and advance the time of death.

On December 31, 2009, the Montana Supreme Court ruled in a 5-2 vote that terminally ill Montanans have the right to choose aid in dying under state law. In January 2014, New Mexico Second Judicial District Judge Nan Nash issued a landmark decision that terminally ill, mentally competent adults have a fundamental right to aid in dying under the substantive due process clause of the New Mexico State Constitution.

On February 6, 2014 the Canada Supreme Court ruled that prohibition of assisted dying violates the right to life, liberty and security of the person and is not in accordance with principles of fundamental justice.

We urge all Alaska legislators to support An Act Relating To The Voluntary Termination Of Life By Terminally Ill Individuals, (HB 99) so state residents with a terminal illness can be secure in the ability to achieve a peaceful death if they choose.

Sincerely,

A handwritten signature in blue ink that reads "Barbara Coombs Lee". The signature is fluid and cursive, with a large initial 'B' and a long, sweeping underline.

Barbara Coombs Lee PA, FNP, JD
President