

**Testimony of Seth A. Morgan, MD, FAAN**

**Regarding SB0845/HB0933**

**The Honorable Elijah E. Cummings and the Honorable Shane E. Pendergrass End-of-Life  
Option Act**

**March 7<sup>th</sup>, 2023**

My name is Seth Morgan. I am a physician, a person with disabilities due to multiple sclerosis and cancer, and an advocate for people with disabilities. I strongly support this End-of-Life Option Act.

Like most Americans with or without disabilities, I value my right to make independent choices. I find it both condescending and offensive when organizations attempt to speak on behalf of all of us with disabilities. Some individuals with disabilities might consider aid in dying as an option if the situation arose; others might not. The data indicate that a large majority of all Americans with disabilities capable of independent decision-making support aid in dying. Surveys performed in Massachusetts, Connecticut and New Jersey found that 62 to 75 % with self-identified disabilities support aid in dying. Regardless, each of us should be allowed to make our own choices.

Also, in the more than eighty years of combined experience of states authorizing Medical Aid In Dying, there has been no evidence of abuse or coercion of individuals to elect MAID, no expansion of the medical conditions for which it is allowed, and no lowering of the age requirement. Experience has proven that there simply is no “slippery slope” caused by this law. A paradoxical phenomenon is that patients who have access to life-ending medication do not always use it but are willing to fight on longer because they have the comfort of knowing they can use the medication if their suffering became intolerable.

Lastly, two current Maryland laws permitting actions hastening death through either palliative sedation or Voluntarily Stopping Eating and Drinking provide none of the protections built into

the End-of-Life Option Act and use of palliative sedation may be initiated without the permission of the affected individual. Requirements of the proposed legislation, including evaluation by a second physician and a 15-day “cooling-off” period, are unique to this legislation. The Act provides more protections and a better process in which a person can die comfortably at home surrounded by loved ones.