

**Shirley Reddoch
Columbia, MD**

Written Testimony: **Unfavorable of
SB0845(HB933) End of Life Option Act**

As a physician clinician and educator of 40+ years experience, I am testifying in opposition to SB0845(HB933). Antithetical to the Mission of Medicine, this legislation is Dangerous to Society as a whole **AND works against the health and safety promoting efforts of members of this Assembly-- including some of you.**

You acknowledge the increasing depression and anxiety crossing all age groups and demographics, not to mention suicides and suicide attempts and speak to the need to improve and expand mental/behavioral health services, and recognize key drivers:

- 1) Ease of access—legal no less-- to increasingly efficient means of self-destruction: guns and drugs leading the day. There is no recovery or healing from one's own physical death.
- 2) Social messaging (any media) that reminds one constantly of being isolated, marginalized, anxiety ridden/depressed, and buying into feelings of being a burden, and --of being "less than."

Consider that this End of Life Option, now expands ease of legal access, to a promoted easier/neater means of self-elimination that is "doctor prescribed."

And validates that a person's existential fears re worth, burden to family and society, and loss of satisfaction in living are actual reality---hence, legitimizing self-termination, fully state supported and "aided" in this way.

No amount of legislation or funding, to boost mental health services, or promote gun safety, or offer more care to the unhoused, incarcerated, immigrant, un/undereducated, and aging -- leading demographics of the vulnerable-- can stay ahead of what End of Life Option promotes and has already opened doors more widely to, wherever it is enacted.

Due diligence research on what has and is happening in states where this Option has been enacted, will tell you expansion in understanding and scope moves much faster where another state follows suit (not to mention countries in the global picture—cannot even adequately cover the sea change of care in Canada since this legislation was enacted there a mere 7 years ago).

Some of you may see this as a no fiscal cost, administrative accountability, or legal culpability issue on your part. But **this legislation further hammers away at the integrity of offered "healthcare", messaging a re-prioritization of covered services and a "reevaluation" of the individual person, in a given situation. Our young and future generations will bear the weight and pay the price.**

This legislation will ultimately impact the numbers, make up and attitudes of those entering, not only medicine, but all the health care professions.

Respectfully Submitted,
Shirley Reddoch, MD
Pediatrician, Pediatric Hematologist/Oncologist