Diane L Kraus 1190 W Northern Parkway, apt 612, Baltimore MD 21210 March 7, 2023

RE: SB 0845 SUPPORT

I support Medical Aid in Dying because I have seen how the end of life can be so painful, even on hospice and medications. I know what the painful comatose person's transition to death is for the dying person as well as for the family and caregivers. If you have ever sat with a dying patient, sat with them for hours, then you know how difficult it can be for the patient and the family.

I have metastatic breast cancer stage 4, and I am dying. Not today, not tomorrow, but that day is soon approaching.

The majority of Maryland voters (71%) support Medical Aid in Dying, across all religions, genders, race, political affiliation, and stance on abortion (pro-life even 49%). Please don't allow some religious beliefs and the minority determine my bodily autonomy. The choice should be mine. Support this bill for people like me, families, and for the right of bodily autonomy.

My story and history of awareness:

I come with a vast knowledge about the dying patient. I took end of day/ night care of my mother who also had metastatic breast cancer. I worked 35 years as an Occupational Therapist, and for 23 years of my career in homecare and in hospice. And now I am the dying patient. I have been caregiver, family, friend, and patient.

I had breast cancer 11 years ago with lumpectomy, intense chemo, radiation, and more chemo. I thought I was in the clear.

Then nearly two years ago, in May of 2021, I developed pain in the bone of my chest, not from my heart. And a lump grew there. They didn't see anything on the Xray. I didn't have insurance in MD, only MA. The lump and pain improved, but was still present, and 6 weeks later when I was finally able to get back to Cape Cod I was checked again. There an ER doctor and CT scan told me I had extensive metastases throughout my chest, liver, and lungs. Brain MRI showed cancer as did my skull.

I moved to MD a week later as planned but couldn't start my new job- I had to start chemo. Tests showed in-numerable tumors in my lungs and liver, all of my lymph nodes, multiple bones, my skull, and my brain. Follow up tests showed growth to 13 tumors in my brain for which I have had whole brain radiation. That was the worst thing I have ever done. I have failed the first 2 types of chemo, but now on chemo 3 have a better potential for being alive in 6 months. I should be dead by now, but the new drug does give me hope to be able to spend time with my son a little longer

And in this last year I have made functional declines. I continue to get weaker every week. I have lost 40 pounds from the cancer and the chemo. I am nauseous, constipated, have severe daily headaches, and bone pain in my back and head. The brain radiation left me with blurred vision in my right eye and very loud ringing with limited hearing in my right ear. That won't improve. The chemo has left me with

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neuropathy in my fingers and toes. But I continue to fight, for myself, and to spend as much time as I can with my twenty-nine-year-old son.

Having worked and seen up close many people in their transition from life to death, I know what it can look like with multiple different diagnoses. From neurological conditions like ALS, MS, Parkinson's and brain tumors, as well as different types of cancer. I have seen the pain with just moving in bed a few inches can cause. And although hospice is an awesome thing, it can't be there 24/7.

My mother was mentally competent until the last 6 days of her life when she slipped into a coma like state from the cancer. Over the last two months, she had no quality of life and a great deal of pain, and she was on hospice. The pain medicine was helping her but even upped, or changed did not cover the pain she had when we had to roll her side to side or bathe her, moving any limb for any movement.

She would moan. I can still hear that moan. And her breathing was difficult as her lungs were filling with fluid.

Even on hospice, she, like many of my patients, did not have a peaceful or gentle death.

The end of life should be able to be CHOSEN how we want to pass on from this world. Those with the mental capacity should be allowed to avoid the last week or two of suffering. Most of my patients would tell me a week or two before they died that they had had enough and just wanted to pass away then. I don't know if they would have taken the option if it was available to them but it would have been nice to know they could choose it if they were ready.

For me, my biggest concern isn't the physical declines that have started and I know will be comingthose I can adapt for or get help. My realization is that as we get closer to death we are not the person others have known us to be. We become different. I want people to remember me as the funloving, playful, yet dedicated, serious, and caring person that I still am. I don't want them to remember me as I remember the declined persons my patients were, or the moaning like my mother, or the end-of-life pain like so many – - and I know I am highly likely to have that intense pain with my bone tumors. National studies show 65 to 85 percent of cancer patients have pain. Of those with metastatic cancer, 90% report pain. In fact, despite the wide availability of hospice, palliative care, and pain management, people experience breakthrough pain that is not controlled by regular doses of pain medicines, and can happen many times a day, especially as the end draws near.

Maryland allows for bodily autonomy in pregnancy. Shouldn't evaluated by doctors, mentally capable adults with medical aid be allowed options for their end of life?

Please pass this medical aid in dying legislation. The majority of Marylanders across all the ages, the ethnicities, and religions agree. NOW IS THE TIME.

Allow me to be the person I am until I get close to the end, and allow me to have the option to have a death that is gentle and peaceful.