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Regarding HB 403 and SB 443
To Whom It May Concern:

My name is Dr. Diana Barnard. Thank you for the opportunity to share my expertise in Medical Aid in Dying (MAID), and the reasons why I strongly encourage you to support the MAID bill before you. I have been a board-certified Family Medicine Physician for nearly 30 years. I am also board-certified in Hospice and Palliative Medicine. The past 15 years of my practice have been spent caring exclusively for patients and families living with serious illness.

I practice medicine in Vermont where Medical Aid in Dying has been legal for more than 10 years. I regularly prescribe medications under the law and also support and educate other physicians who participate. The most recent legislative report (published in January, 2024) shows that our law is working well and as intended. 203 Individuals have qualified for the law without a single instance of abuse. Our growing experience in Vermont mirrors that of the 9 other states and the District of Columbia where Medical Aid in Dying is legal. This practice offers vital comfort and a measure of control for people who are desperate to live, and yet must accept that they are dying.

Importantly, Medical Aid in Dying laws also protect the right of those physicians and patients who do not believe in its concepts or choose not to participate.

There is a robust and active American Academy of Medical Aid in Dying (<https://www.acamaid.org>), as well as MAID Clinical Guidelines and standards of care for the practice which can reliably result in a peaceful death for those utilizing the law. In Vermont, we have developed our own educational website with information for patients and clinicians <https://www.patientchoices.org>

I cannot emphasize enough the unique and individual challenges people living with terminal illness face. The people I care for want to live as long as possible. When their illness is advancing and treatment options become severely limited, people also want a say in how they will die. Some will have a peaceful death with symptoms that can be managed reasonably well. Some will have difficult deaths with symptoms that are more challenging or even impossible to adequately control. As you consider this law, please keep in mind the deeply personal nature of suffering, the most intimate reality of facing one's own death, and need for options as we each walk down our own path towards the end of our lives.

I am here to speak for people like Willem Jewett; a 59 year old lawmaker I had worked closely with to pass Vermont's MAID law and who just a few years later was diagnosed with metastatic melanoma. He wanted desperately to live. He had two beautiful daughters and had fallen madly in love with and married his second wife just weeks before his terrible diagnosis. He lived with high disease burden in order to have time with his beloved family. Only when treatment was clearly no longer benefitting him, and when we could no longer alleviate his suffering, did his hopes for a longer life transform into hopes for a decent death. He used MAID and died very peacefully surrounded by his whole extended family in one of the most peaceful deaths I have ever witnessed.

I am here to speak for people like John Roberts; a 90 year old Navy Veteran facing the final stages of advanced metastatic prostate cancer who asked me to share his story. As his Cancer progressed, he became increasingly concerned about what would happen in the final weeks of his life. He worried about how and where he would die. As he lost the ability to do more and more of the things that gave his life meaning, he remained steadfast in his wish to remain in his own home and to be able to care for himself. MAID allowed him the peace of mind to be able to die as he had lived; on his own terms. As is often the case with my patients, having access to MAID allowed John to set aside his end-of-life fears and to focus on living fully in the present.

Polls in Delaware show that a large majority of residents in your state want access to Medical Aid in Dying as an option when they are facing their own terminal illness. I urge you to listen to the residents of your state and to pass HB 403/SB 443 in this session.

With Gratitude and Peace,

Diana Barnard, MD