

**Senate Bill 443 - End-of-Life Option Act (The Honorable  
Elijah E. Cummings and the Honorable Shane E. Pendergrass Act)**

Judicial Proceedings Committee  
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**OPPOSE**

SB 443 should receive an unfavorable report because it is ***dangerous*** and ***unnecessary***.

I oppose SB 443 for many reasons. I'll discuss only two important reasons since many other witnesses will address the numerous other reasons why it should not become law.

**SB 443 is UNNECESSARY**

SB 443 is unnecessary because suicide is legal and widespread in Maryland. Sixteen years ago, my brother-in-law committed suicide in Maryland using the method described in SB 443. He went to a doctor and got a prescription for pain pills. But he didn't take them as prescribed. Instead, he swallowed all the pills at once, committing suicide by overdosing on pain pills, just as SB 443 allows. But committing suicide in this way ***is already legal in Maryland***. My brother-in-law ended his life this way ***in Maryland*** without enactment of SB 443.

It's also unnecessary because it's easy in Maryland to find advice on a myriad of ways to commit suicide. "Final Exit Network" has a website, <https://finalexitnetwork.org/resources/fen-resources/options-for-hastening-death/>, that gives guidance on how to find ways to commit suicide. Committing suicide by the ways promoted on the website ***is already legal in Maryland***.

**SB 443 is DANGEROUS**

In 2022, both the MD Senate and House unanimously passed SB 94, "Public Health — Maryland Suicide Fatality Review Committee," and it became law. The preamble contained many important facts, such as that one-half of all people who die by suicide in Maryland have mental health problems, suicide deaths are significantly underestimated and inadequately documented, and between 2000 and 2018 the number of recorded suicide deaths in Maryland increased from 474 to 650, an increase of 37%.

One of the stated purposes of SB 94 was “to develop strategies for the prevention of suicide deaths in this State....” The overwhelming support for SB 94 leads to the conclusion that if suicide should be prevented, it is ***not*** something that should be promoted. SB 443 ***promotes*** suicide by trying to make it mainstream, legitimate, and acceptable. In fact, SB 443 promotes suicide by making it “health care.”

SB 443 is dangerous because by legitimizing suicide in Maryland, the suicide rate in Maryland’s general population will most likely increase dramatically. This is not an irrational fear but is based on the data that have come out of Oregon over the past 25 years. According to the Oregon Health Authority, the overall suicide rate in Oregon has increased every year since 2000. The rate of suicide in Oregon is higher than the national suicide rate for all age groups.<sup>1</sup> Just ten years after Oregon legalized physician assisted suicide, Oregon’s conventional suicide rate was 35% above the national average.<sup>2</sup>

In closing, consider that the definition of “medication” is: a chemical compound used to treat or cure illness. The definition of “poison” is: a substance that harms or kills people or animals if they swallow or absorb it. SB 443 is about physicians writing prescriptions for poison, and making it legitimate health care. When my brother-in-law took his own life, he did not ingest medicine — because of the number of pills he swallowed all at once he ingested ***poison***. Suicide is a ***tragedy***, NOT health care. I urge an unfavorable report.

Respectfully submitted,

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<sup>1</sup> Oregon Health Authority, “Suicide Trends,” 2017.

<sup>2</sup> Oregon Health Authority News Release, 09/09/10