

I am writing in opposition to SB 443 "End-of-Life Option Act."

My husband had a heart condition that needed treatment for 20 years. We enjoyed our 20 years together. If this bill had existed back then, the insurance company would probably have encouraged my husband's doctor to suggest suicide over treatment as they have done on the west coast. The passage of physician-assisted suicide in the states of Oregon and Washington has led to a disproportionately large number of society's most vulnerable taking their lives. Indeed, some advocates for physician-assisted suicide grossly point to the potential "cost-savings" for taxpayers.

<https://www.washingtontimes.com/news/2017/may/31/insurance-companies-denied-treatment-to-patients-o/>

If this bill passes, there would be terrible unintended consequences for people with disabilities. They would become victims of government overreach. The disabled patients who could not afford to pay for treatments, would be encouraged to commit suicide. You may not want this to happen but unfortunately, in this current climate, that is what would happen.

Proponents of the bill also argue that it is intended for people who are terminally ill. But the meaning of "terminal illness" has changed over time, thanks to medical breakthroughs. It is possible to live with "terminal" diseases. Emily Ward for example: <https://conquer-magazine.com/issues/2020/vol-6-no-1-february-2020/1194-defying-the-odds-how-i-ve-survived-a-male-dominated-terminal-cancer-for-7-years>. Ms. Ward was a nurse and was therefore able to advocate for herself and was not afraid to ask doctors questions. She had the support from doctors who wanted to help her. Steffi Dawn Ilagan survived lymphoma: <https://conquer-magazine.com/issues/2022/vol-8-no-6-december-2022/1958:you-only-live-t-w-i-c-e-a-cancer-warrior-s-motto>. She was lucky to have financial support from her family in order to fight it. **Unfortunately, another side-effect of SB 443 would be to create an atmosphere where patients who do not have a medical background or who do not have the money to seek out doctors who will help them will receive unequal treatment. Patients who cannot advocate for themselves or who do not have money will be encouraged to accept a death sentence. This would be the final injustice for the underserved.**

Many in the medical profession have come out strongly against physician-assisted suicide. Just to name a few of the medical groups:

- American Medical Association
- American College of Physicians
- Maryland Chapter of the American College of Physicians
- Maryland Psychiatric Society

We can just look to other countries that have passed this to see what will happen. For example, the Netherlands adopted euthanasia over thirty years ago, and the results are disturbing to say the least.

The Current Oncology (Vol. 18, No. 2, 2011) journal summarizes the results of the Dutch experiment with euthanasia:

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3070710/pdf/conc-18-e38.pdf>

"In 30 years, the Netherlands has moved from euthanasia of people who are terminally ill, to euthanasia of those who are chronically ill; from euthanasia for physical illness, to euthanasia for mental illness, to euthanasia for psychological distress or mental suffering – and now to euthanasia simply if a person is over the age of 70 and "tired of living." **Dutch euthanasia protocols have also moved from conscious patients providing explicit consent, to unconscious patients unable to provide consent.**"

To quote from the Maryland Chapter of the American College of Physicians:

“We all have fears about death. But for a doctor to prescribe a bottle of poison is neither compassion nor treatment. The physician’s role is as healer and comforter. The compassionate choice for Maryland is to promote access to high quality palliative and hospice care.”

I know that you want to do the right thing, but you must be very careful because your decision will affect all of the people in our state, and it will resonate throughout our country.

Your laws have consequences.

Oppose SB 443.

Thank you,

Lorraine Jaffe

Bethesda, MD