

Testimony against Physician Assisted Suicide

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Greetings members of the committee

My name is Renee Walbert and I live in Denver CO. I'm here today to testify against the bill. I have grave concerns about the inability of this bill to protect people with disabilities and the elderly from the prejudices and fears our society has about our lives and the pressures and inaccuracies we may face.

I'm a Mom and Grandmother. All of us in my immediate family have a disability or life impacting disorder.

From 2007 till 2013 our family lost all 4 grandparents. Each chose Hospice

My father went first. In 1983 he had an artificial heart valve placed and by-pass. At that time neither my sister nor myself had graduated from college, we were not married and did not have any children—all things my father had desperately hoped to see. He was given a 5 year life expectancy. He lived 24 years. Not only did he live to see us graduate, marry, and have children, he lived to see his oldest granddaughter marry and graduate from college!

Even the best guesses of medical professionals cannot always predict the future

For end of life, there is anxiety, fear and worry. But often death is not the great fear, its pain. You have or will hear from others about the benefits of quality pain control, and deep sedation for those who choose that at the end of life.

Our parents were very open about their wishes for their end of life needs. They kept up their living wills, advance directives as each iteration came.

Even though my parents were knowledgeable, (my mother was the executive secretary to the medical staff director of a world class rehab institute) they still needed assistance in clarifying what they wanted. Originally they said no extraordinary means to extend their lives. Later, forms included more specifics about what that was. As I went through their last iteration, one of the questions was 'do you want a feeding tube'? Both of my parents said No.

This is where my being a mom of kids who have been medical technology dependent comes in. I asked my folks if they knew what a feeding tube was. Neither one did. They just had always said, I would never want a feeding tube. I explained that a feeding tube was the gastrostomy tubes that my two youngest had when they were small. A simple valve that allows for nourishment to enter the stomach or intestine directly, with the ability to vent it so they could quite frankly burp, and not have stomach pain. Such surprise from both of my parents. They had no clue that's what it meant. At that point my father said sure, he'd be willing to have that, it was no big deal. Mom on the other hand said no, she didn't want one. Neither wanted IV fluids at the end either. They both said they wished to be kept comfortable.

Dad chose hospice at home, 9 months for friends and family to visit, laugh, share memories and say our goodbyes. He had two bad days where he needed sedation and died on a Sunday morning waiting for cinnamon rolls to bake! My father in law also chose hospice at home, he too had good pain management. My mother chose a nursing home, and when she could no longer eat or drink, we honored her wishes and did not place an IV or a tube. We had 3 days with her to sing hymns and old swing tunes. My mother in law had the big scary—Pancreatic Cancer. The one everyone fears because of pain. She chose a hospice facility and had doctors who controlled her pain. Even on the day she passed, she was able to eat a little soup before lying down for a nap and died. They all died with family surrounding them.

There is a difference between not doing every intervention versus actively ending someone's life. The former has nuances. The latter is no return!

My two youngest have complex disabilities. Their diagnosis on paper, many people see hopeless misery. But they are not miserable. Both my son live independent lives in their communities of choice with appropriate supports. They have jobs, friends, and great lives. But over and over I meet people, in society at large, and in the medical fields who are quite clueless as to the wonderful quality lives that they lead. I don't want people making decisions to end my children's lives. Despite their developmental disabilities, both have been very clear about what they wish for their end of lives. How do I know? We talked openly with them about what we wanted for our lives and asked them what they would wish for themselves.

Please do not pass this bill. There are not enough protections for people like my kids, and they deserve the same respect that our parents had to meet those needs for pain control through appropriate Hospice supports when the time comes and not be coerced or forced into ending their lives.

Thank you.

The first part of the report deals with the general situation of the country and the position of the various groups. It is a very good summary of the situation and is well written. The second part of the report deals with the specific details of the situation and is also very good. The third part of the report deals with the recommendations and is also very good. The report is a very good summary of the situation and is well written.

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For more details:

Dad chose hospice - he had congestive heart failure, emphysema, and COPD. He'd had some surgeries, but now he was done. He wasn't depressed but he was done with intervention. And he wished to die at home. Hospice services were brought in, dad started calling all his friends and family and said, 'well I'm on hospice I'm gonna die, if you want to come see me you better come now!' And they did. From all over the country. We had 9 months to say our good byes and I wouldn't trade that for anything. He had good comfort care, and as it turns out, he only had two bad days where he needed some sedation and in fact died waiting for cinnamon rolls to finish baking on a Sunday morning with my mother and my son (who has physical and developmental disabilities but wanted to be a support to his Papa and for Nana) by his side.

Mom had been quite clear about her wishes for no intervention. She had Parkinson's and dementia but had been very clear for more than 40 years about what she wanted her end to be. She did not want a feeding tube, did not want an IV. As it turns out it is good that she had both written those desires down and communicated them to us consistently over the years. Because at the end, she could not communicate those things. When the dementia took her ability to eat (on Saturday I brought her to an Andrews Sisters tribute concert and though she couldn't speak by that point, she ate a cookie!) and by Sunday morning she had lost the ability to eat and by Sunday evening could no longer drink. Her kidneys began to fail. Could her kidneys have revived with IV fluids and then a g-tube to keep her hydrated? Yes. But I knew that is not what she wanted. Hospice came in, she spent Monday and Tuesday with myself and friends singing hymns to her and old swing standards. She was in and out of consciousness and by Wednesday was sleeping and shortly after our son arrived to hold her hand one last time, she breathed her last.

My mother in law had the big scary. Pancreatic cancer. She fought it hard for two years. And then she had had enough. She was 83 and had lived a long and wonderful life. She chose the Shalom Home in St. Paul MN because it had a great hospice program. Again, great pain management, the opportunity to live life while she was dying. Counseling to deal with the depression, counselors for the family as we adjusted to knowing she wouldn't be with us anymore. Her pain was controlled and in fact she had eaten a small amount of soup for lunch and had laid back down for a nap and just didn't wake up.

All of them would have been candidates for physician assisted suicide but all were given proper supports through Hospice services. Had they been depressed and asked for life ending assistance we would all have been the poorer for not having them with us!

