

Submission into the Voluntary Assisted Dying Bill 2021

Submission No.: 1090
Submitted by: [REDACTED]
Publication: Making the submission public but withholding your name
Position: I/We support the Voluntary Assisted Dying Bill but recommend some changes to it.
Comments in relation to: Eligibility criteria*
Attachments: No attachment

Submitter Comments:

I absolutely support the passing of this bill.

The comment I wish to make with regards to the eligibility requirements is to critique imminently impending death as a prerequisite for eligibility. Deterioration in quality of life to the point where a reasonable, considered individual may come to the conclusion that they would prefer to end their lives on their own terms does not necessarily come with an imminent terminal diagnosis.

Having said that, the tremendous suffering of the ill and dying and their families is a pressing issue, and I believe it is important that this legislation is carried as soon as practicable.

The story I want to share is about my father. He died in 2018 at the age of sixty-one, after many years of living with the progressive and painful deterioration of his spine. One surgery was attempted around 2006 when the misalignment and fusing of vertebrae became excessively painful, and he began to lose motor function in one of his hands. Only after this did it become clear how tenuous his situation actually was.

Over the following years, a variety of medical interventions were attempted to reduce his pain and retain as much of his physical ability as possible - he at one point had a halo to keep him upright, and a second surgery was attempted in 2017 but unfortunately his physical health had reduced so dramatically that he couldn't even safely be anaesthetised. Dad carried around with him a toolbox of different medications to manage his physical condition and try to keep his pain under control, but despite stubbornness and a high pain thresh-hold, this could only go so far. It was a matter of trying to balance how much medication he needed to manage the physical pain of any tiny action he took, and how much would just knock him out.

At the end of his life, my dad used a wheelchair, he required assistance with daily needs such as showering and toileting, his upper back appeared heavily sunken in with the deterioration of his spine, making him so hunched that he was unable to straighten enough to recline on any bed. Worst of all for him, my Dad's greatest passions and joys in life were driving and music. He had not driven for many years, and with the confirmation that the second surgery was impossible, it became clear he would almost certainly never regain the ability to play the guitar.

He pushed through the pain in the hope of a medical miracle that would see him able to play again. Sometimes he was so heavily medicated he would forget that this was at best a huge longshot. He fell in and out of sleep depending on the time of day, and tracked time by what medication he needed to take.

We had the conversation before the last attempt at surgery about whether he should be resuscitated should his body not cope. By this point, with decisions needing to be made in a timely manner, Dad had a living will so his wife would be able to make decisions on his behalf as necessary. We caught him during the more lucid moments to clarify what he wanted and under what circumstances. Given his medication and pain I would say we collectively decided against accepting medical intervention, especially in the understanding that should anything go wrong during surgery, it would almost certainly mark a further decrease to his quality of life.

Part of our reasoning in making this decision hinged on the fact that, should things take such a negative turn, Dad would not have the choice to request medical intervention to end his life based on the new circumstances.

My Dad was a proud man who did not want to die - but of all the circumstances he suffered through, it was an added, brutal indignity that he did not and would not have the right to decide to end his life on his own terms. As his mental and physical capacity diminished, his only option would have been to refuse the numerous medications that offered him a semblance of relief until finally his health gave in. That would not have been comfortable, or swift, and I imagine it would have been traumatising to the hospital workers and doctors just as it would have been for us. But it was a possibility he considered and discussed with us.

It didn't come to that though. When Dad died, it was due to a condition unrelated to his spine. Unlike his other sufferings, it was mercifully quick. I am so grateful that his pain was not prolonged even further, but this was purely a matter of chance.

I believe that barring those who are living in pain with terminal illnesses from making their own choices about how their lives end, and barring doctors from fulfilling this request, is nothing short of cruelty. Honestly, I don't know if my Dad would ever have decided to end his life with the assistance of a physician. Maybe he wouldn't have. But it was and is both terrifying and insulting that he would not have been afforded the basic dignity of making that choice to begin with. As human beings we deserve better.