



# Choice and Dignity, Inc.

End-of-Life Training, Resource and Referral

P.O. Box 86886, Tucson, AZ 85754

800-811-4112 ~ [www.ChoiceAndDignity.org](http://www.ChoiceAndDignity.org)

## OCTOBER 2023 Newsletter

### In The News

#### International News:

##### November 2nd is World Right to Die Day

November 2<sup>nd</sup> is the observance of World Right to Die Day. The day was founded in France at the World Federation Conference in 2008 and has since spread to other countries. It is the occasion to raise awareness about how societies can approach end-of-life care and death with more compassion. Many live with chronic conditions and terminal illness into older age, experiencing unnecessary suffering and a loss of dignity. Yet the right to die is a delicate matter because of cultural and religious beliefs, conflicts between patients and families, and doctors' reluctance to have end-of-life conversations, among other reasons.

##### New Zealand doctors plea for broadening right to die law.

According to the New Zealand Herald, medical experts say the current law is failing the Kiwis (New Zealanders) it is meant to be serving. According to the End of Life Choice Act 2019, only those who suffer from a terminal illness likely to end a person's life within six months is eligible for assistance in dying.

Doctors are calling on the government in an open letter to broaden the law to remove the six-month criteria.

The End-of-Life Choice Society NZ says the current wording of the law means too many people are being left out. "A growing number of assisted dying practitioners, patients and families would like to see the option of assisted dying extended more equitably to grievously and irremediably suffering patients."

A third of the ineligible patients who were declined assisted dying in the law's first year were declined because they didn't meet the criteria of having a terminal illness likely to end their lives within six months. (Editor note: New Zealand's eligibility requirements are very similar to the U.S. MAID states.)

##### Emilio Coveri, president Exit-Italia, sentenced

The Assize Court of Appeal of Catania sentenced Emilio Coveri to three years and four months imprisonment for incitement to suicide in the case of Alessandra

### In The News — continued

Giordano, who suffered from depression and Eagle syndrome. She died in Switzerland with assisted suicide at the age of 47 in 2019.

Eagle syndrome is a disorder of the ligaments which connect the skull to the hyoid bone of the neck. Calcification causes painful symptoms occurring in the mouth, head, neck, throat and forehead, with limitation of neck movements and other serious limitations. Ms. Giordano was a member of the Exit Italy association.

According to the Public Prosecutor's Office, Mr. Coveri "provided a causal contribution suitable for strengthening a previously uncertain and hesitant suicidal intention on a person suffering from pathologies that are not irreversible although painful. For the prosecutor, "the individual choice, taken in full autonomy must be respected", but it is necessary to evaluate whether "we believe that it is elicited to propose suicide to people who are not in conditions of irreversible pathology, perhaps only depressed, as the only remedy for their suffering".

##### Man accused of providing suicide chemicals

ROB GILLIES — Associated Press

TORONTO — Canadian police said Tuesday they charged a man with 12 additional counts of counseling and aiding suicide for allegedly selling lethal substances on the internet to people at risk of self-harm.

An international investigation is underway following the arrest in Canada this year of Kenneth Law, who was initially charged with two counts of counseling and aiding suicide. Canadian police say Law, from the Toronto area, used a series of websites to market and sell sodium nitrite, a substance commonly used to cure meats that can be deadly if ingested.

British police on Friday said they are investigating the deaths of 88 people in the U.K. linked to the websites.

Canadian police say Law is suspected of sending at least 1,200 packages to more than 40 countries. Authorities in the United States, Italy, Australia and New Zealand also have launched investigations.

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'We are aware of police investigations going on in jurisdictions outside the province of Ontario, and we are cooperating and sharing information with law enforcement on a global scale,' James said.

Britain's National Crime Agency said it identified 232 people in the U.K. who bought products from the websites in the two years up to April, 88 of whom died. The agency said it was investigating whether any crimes were committed in the U. K.

James, the Ontario officer, said a joint task force is investigating the Ontario cases and it includes 11 police jurisdictions in the Canadian province.

It is against the law in Canada for someone to recommend suicide, though assisted suicide has been legal since 2016 for people aged at least 18. Any adult with a serious illness, disease or disability may seek help in dying, but they must ask for that assistance from a physician.

### **She's 47, anorexic and wants help dying. Canada will soon allow it.**

By [Anna Mehler Paperny](#)

July 15, 2023 8:56 AM MST Updated 2 months ago  
TORONTO, July 15 (Reuters) - Lisa Pauli wants to die.

The 47-year-old has wrestled with the eating disorder anorexia for decades; she says she has had a warped relationship with her body since age eight.

These days, Pauli says, she weighs 92 pounds and may go days without eating solid food. She says she is too weak to carry groceries home without stopping for breaks.

"Every day is hell," she said. "I'm so tired. I'm done. I've tried everything. I feel like I've lived my life."

Pauli cannot legally get medical help to die - yet.

An expansion of the criteria for medically assisted death that comes into force in March 2024 will allow Canadians like Pauli, whose sole underlying condition is mental illness, to choose medically assisted death.

Canada legalized assisted death in 2016 for people with terminal illness and expanded it in 2021 to people with incurable, but not terminal, conditions. The legal changes were precipitated by court rulings that struck down prohibitions on helping people to die.

The new mental health provision will make Canada one of the most expansive countries in the world when it comes to medical assistance in dying (MAID), according to an expert panel report to Canada's parliament.

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## In The News — continued

Proponents of assisted death - which is still a novel concept in many parts of the world - say it is an issue of personal autonomy. But six disability rights and religious advocates told Reuters that the pace of the planned changes to the assisted death framework in Canada brings additional risks of people opting for MAID because they are unable to access social services - the lack of which could exacerbate their suffering.

Canada's Justice Minister, David Lametti, dismissed criticism that the country was moving too fast or opening up the system to abuse. Some disability advocates have demanded rolling back the current framework because they argue it puts people with disabilities at risk.

See entire article at <https://www.reuters.com/world/americas/shes-47-anorexic-wants-help-dying-canada-will-soon-allow-it-2023-07-15/>

## U.S. News:

### **California: disability groups seek repeal End of Life Options Act**

A few disability rights groups and individuals with chronic disability have sued the State of California seeking to overturn the State's End of Life Options Act. According to the groups the law "steers people with" disabilities "away from necessary mental health care, medical treatment, and disability supports and towards death by suicide."

California adopted its law on June 9, 2016, which includes a multitude of safeguards to ensure that only mentally competent, terminally ill adults with ability to make their own informed — and fully voluntary — medical decisions are able to choose the benefits of the law. Kathryn L. Tucker, of The Completed Life Initiative, had written a press release on the case. For more information please read here: [Completedlife.org/Advocacy](https://Completedlife.org/Advocacy)

### **End-of-life pill vetoed by Lombardo despite wide-spread support in Nevada**

by: [Greg Haas](#)

Posted: Jun 5, 2023 / 07:59 PM PDT, Updated: Jun 5, 2023 / 08:23 PM PDT

LAS VEGAS (KLAS) — Republican Gov. Joe Lombardo vetoed the "medical-aid-in-dying" bill on Monday — the so-called end-of-life pill.

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## In The News — continued from page 2

Lombardo has now vetoed 32 bills this session, turning away proposals passed by the Democrat-majority Nevada Legislature. Lombardo's message in vetoing Senate Bill 239 (SB239):

*"SB239 allows for physician assisted suicide in the State of Nevada. End of life decisions are never easy. Individuals and family members must often come together to face many challenges — including deciding what is the best course of medical treatment for a loved one. Fortunately, expansions in palliative care services and continued improvement in advanced pain management make the end-of-life provisions in SB239 unnecessary.*

*"Given recent progress in science and medicine and the fact that only a small number of states and jurisdictions allow for similar end-of-life protocols, I am not comfortable supporting this bill."*

SB239 was one of the most talked-about pieces of legislation this session, with 262 comments in support and 632 comments against. Despite that disparity, a poll released by the group Compassion & Choices says 82% of Nevadans support medical-aid-in-dying legislation.

"Despite these record-high poll numbers in support of medical aid in dying, thousands of phone calls, petitions and emails, Gov. Lombardo refused to meet with bill supporters before becoming the first governor to veto a medical-aid-in-dying bill," Kim Callinan, president and CEO of Compassion & Choices Action Network, said in a news release shortly after the veto.

SB239, sponsored by nine Democrats and co-sponsored by 10 more, would have allowed terminally ill Nevadans to self-administer medication to end their own lives. The bill contained a number of steps to ensure the decision was not influenced by others, as well as legal protections for medical personnel involved in the process.

Votes on SB239 were closer than votes on any other bill as it passed through the Legislature. Several of the approvals came by only a single vote.

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## In The News — continued

The patient's death certificate would state the cause of death as the terminal condition, the bill specifies. The death would not be considered "mercy killing, euthanasia, assisted suicide, suicide or homicide when done in accordance with the provisions of this bill."

SB239 also specifies that insurance companies are prohibited from making refusing to sell, provide or issue a policy based on a patient's interest in ending their life this way. Insurance policies must be honored, the bill indicates.

A physician or pharmacist would have dispensed the fatal dose — but administered by the patient. The legislation does not specify a drug that would be used.

### **Oregon Governor Signs Law Making It 2nd State to Remove Medical Aid-in-Dying Residency Mandate**

Compassion & Choices Action Network and advocates across Oregon are praising Governor Tina Kotek for signing bipartisan legislation to solidify a critical improvement to Oregon's Death With Dignity Act by formally removing its residency requirement. The Oregon Senate passed House Bill 2279 in June by a bipartisan vote of 17 to 8 following the House's approval of the bill in March by a bipartisan vote of 35 to 21.

The Oregon law has authorized access to aid-in-dying medication for terminally ill, mentally capable adults since 1997, but it has required that patients be Oregon residents. However, last May Oregon officials agreed to a settlement of a federal lawsuit filed by Compassion & Choices on behalf of a Portland physician who treats patients nearby in Washington, Dr. Nicholas Gideonse, claiming that the residency requirement in Oregon's medical aid-in-dying law violated the U.S. Constitution's guarantee of equal treatment. Settlement of the case, *Gideonse v. Brown, et al.*, required the Oregon Health Authority (OHA), Oregon Medical Board and the Multnomah County District Attorney to issue directives halting enforcement of the unconstitutional residency provision of the law and initiate a legislative request to permanently remove the residency language from the law.

In May, Vermont Governor Phil Scott (R) signed legislation to remove the residency requirement in its medical aid-in-dying law following a settlement of a federal lawsuit filed by Compassion & Choices on behalf of a terminally ill Connecticut woman, Lynda Bluestein. Seven other states and Washington, D.C., have medical aid-in-dying laws with residency requirements: California, Colorado, Hawai'i, Maine, New Jersey, New Mexico and Washington.

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### Local News:

#### Choice & Dignity presents at Arizona OLLI (Osher Lifelong Learning Institute)

Board Members Laura Vandergrift, with an assist from Sally Hall, M.D., presented a series of four classes online for the Yavapai College OLLI group.

Board Members, Jim Schultz, J'Fleur Lohman, and Maggie Molloy will be presenting five in-person classes to the Tucson OLLI, University of Arizona, Central Campus group during the month of October.

#### Choice & Dignity Brochure

We distributed over 600 brochures to the Pima County Library system for distribution around the county. If you would like a copy for yourself, they are available on our website.

#### Board Elections

At our August Board Meeting, the following persons have been elected to fill the offices of the Board of Directors of Choice & Dignity, Inc. for a two-year term:

President: James (Jim) Schultz

Vice President: Tracy Corbin

Secretary: Maggie Molloy

Treasurer: Susan Becker

#### Guest Opinion - John Abraham

Know this: The three most frequently mentioned end-of-life concerns are: loss of autonomy (93.5%); decreasing ability to participate in activities that make life enjoyable; (92.2%); and loss of dignity. (77.9%).

From a recent study only 11% of doctors said they personally spoke with their patients about the possibility of death, even though the doctor knew the patient was dying. Thus, it is crucial to have a clear set of advance directives and a caring and assertive Advocate.

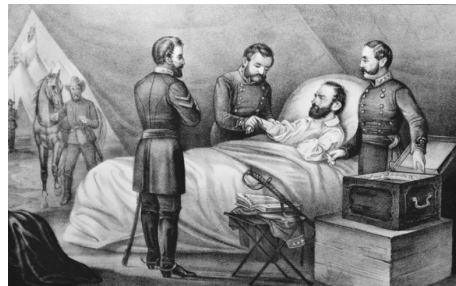
Unfortunately, many people don't realize how critically important it is to have an Advocate which in Arizona is called either "Surrogate" or "Health Care Agent". It is regrettable that directives are only honored in the state of origin.

Basically, our whole healthcare system is geared to keeping you alive. Some doctors see death as a personal failure, and hospitals need more money and want to avoid litigation. But you can avoid treatment you don't want.

Legal precedents leading to modern views of end-of-life issues date back to an 1891 Supreme Court ruling that stated people should have control over their own bodies. From this precedent there grew an understanding that people must understand and agree to medical treatment, and that the right of informed consent does not end when people become incapacitated. Always, you or your advocate can say "NO".

## Guest Article: "Prepare to Die"

### The Old Man's Friend Refuse Antibiotics to Achieve a Peaceful Death



*The Death of "Stonewall" Jackson - Currier & Ives (1872)*

*"If you don't know how to die, don't worry; Nature will tell you what to do on the spot, fully and adequately. She will do this job perfectly for you." M. Montaigne (1533-1592)*

In 2021, former US President Bill Clinton was rushed to a California hospital suffering from a urinary tract infection that had developed into sepsis, a life-threatening blood infection. According to the National Institute of Health and Care Excellence, "Sepsis starts when the immune system overreacts to an infection and begins to damage the body itself, leading to organ failure" and death if not treated. Clinton surely would have died if he had not been treated quickly with antibiotics. Research shows sepsis can kill in as little as twelve hours, so time is of the essence in diagnosis and treatment. But what kind of death would it have been? According to Dr. Manisha Juthani-Mehta, it's a peaceful death.

**"Left untreated, a person with pneumonia (or sepsis) will slowly lose consciousness and pass away in his or her sleep."**

In 1892, Dr. William Osler, one of the founders of the Johns Hopkins School of Medicine, referred to pneumonia as "the natural enemy of the old man," currently phrased as "The Old Man's Friend." In the years before antibiotics, people usually died from infections such as pneumonia and tuberculosis, the leading causes of death in the 1900s. My thirty-one-year-old grandmother died at home in 1933 from TB, ten years before the antibiotic, Streptomycin, was developed as an effective treatment. It is widely accepted that in 1863 Stonewall Jackson died of sepsis due to pneumonia. Stonewall Jackson & The Old Man's Friend. Jackson had many health issues, including an arm amputation around the same time, but five physicians who attended him said he had pneumonia and no infection at the wound site.

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## Guest Article — continued from page 4

Additionally, he, like Clinton, suffered similar symptoms as sepsis patients then and now, delirium, fever, and fatigue. Ironically, Dr. Osler died of pneumonia in 1919. **"The well-intentioned use of antibiotics may only prolong a person's suffering."**

"But for some dying patients, the greatest harm of antibiotic use may simply be to prevent a relatively quick and peaceful death; for those enduring intractable pain, or struggling to breathe, or slowly deteriorating in a hospital bed, an infection might bring a painless end to their ordeal." (Timothy Sullivan, MD)

Many doctors over-use antibiotics in end-of-life (EOL) patients; many times, "curing" them more than once. Wrongful Life Lawsuits have gained traction where doctors blatantly disregard advance directives and surrogates in administering antibiotics to incapacitated patients. In **Greenberg-v-Montefiore NR Hospital** the doctor deliberately gave antibiotics to a severely demented, hospice patient who was near death from sepsis. The treatment went against a POLST, living will and his surrogate/wife. He brought the patient back from the brink of a longed-for death, prolonging his and his family's misery and suffering. "We may need to consider Osler's view that pneumonia can be the friend of the elderly and focus our efforts on patient comfort and relief of suffering rather than treatment with a limited chance of individual patient benefit and a risk of harm to others in the ICU." (Michael Niederman, MD) **How can I die? It's a question I often get asked as an end-of-life counselor and consultant.**

As Final Exit Network's Surrogate Consultant, I often work with clients at the end of their rope, suffering from a litany of health conditions that, although may not be terminal, are hampering any quality of life. They wish to die peacefully but do not live in a state where medical aid-in-dying is offered, nor would they qualify if they did. In 2021, I wrote a blog **How Can You Die When You've Had Enough of Life?** In it, I share a list of EOL options, but the legal method I suggest most for a dignified and peaceful death is to stop all treatments, especially antibiotics. **Doing nothing and letting nature take its course, will likely lead to a quick and peaceful death, usually in hours or days.**

If you are the surrogate or medical power-of-attorney for an incapacitated loved one at the EOL and wish to end their pain and suffering, you can say no to

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## Guest Article — continued

antibiotics. Simple, legal, and effective. However, be prepared for pushback from medical staff who routinely treat infections with antibiotics that often cause more harm than good to their patient. Legally, patients have the right to refuse or reverse any treatment, even if it will cause death. It's the patient's or surrogate's choice, not the doctors, to treat an illness or to stop all treatment.

**Mr. Montaigne got it right in the sixteenth century, "Nature will tell you what to do on the spot, fully and adequately." If only we had the ears and the courage to listen.**

Althea Halchuck, EJD, BCPA, CT  
Ending Well Patient Advocacy, LLC  
Final Exit Surrogate Consultant  
August 1, 2023

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## Call for Volunteers

We admit it! Many hands make light work, and we need more volunteers.

Our devoted Choice and Dignity Board of Directors is seeking help with several endeavors. Please call 1-800-811-4112 or send us a note at [ChoiceandDignityInc@gmail.com](mailto:ChoiceandDignityInc@gmail.com) if you might be willing to help.

## Discussion Group organizers/leaders

Would you like to help people discuss issues related to death?

## Grant Writer

Do you have **grant writing** experience? We need someone to write applications for grants.

## Social Media Guru

Are you skilled at **social media**? You could help develop our presence.

## HOA & Church/Synagogue Members

We can always use venue Hosts: do you have a clubhouse or community center suitable for meetings?

## Media Reviews

### MAID Hits the Big Screen

*Last Flight Home* by MTV Documentary Films has been nominated for an Emmy Award in the category of "Exceptional Merit in Documentary Filmmaking." Congratulations to director Ondi Timoner and the entire team for this well-deserved recognition.

The film, which premiered at the Sundance and Telluride Film Festivals, chronicles the remarkable life of Eli Timoner and his decision to use the California End of Life Option Act to peacefully end his life with grace and dignity surrounded by family including his daughter Ondi, an internationally acclaimed documentary director.

**[Watch the trailer for Last Flight Home!](#)**

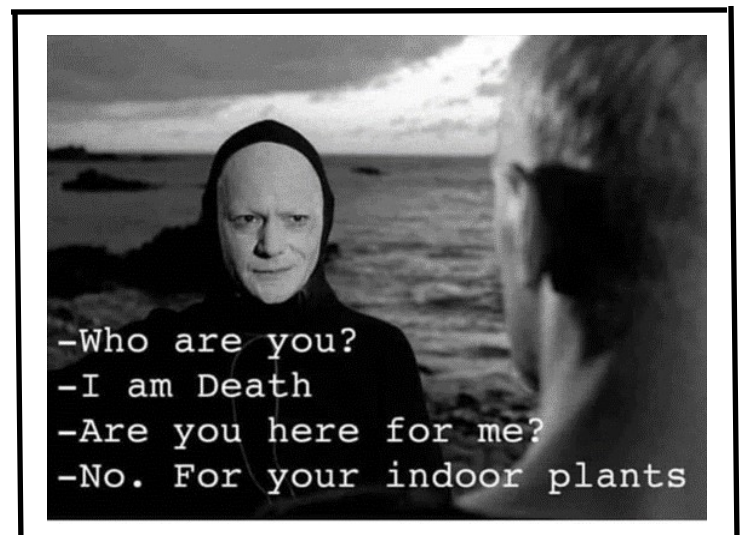
### About *Last Flight Home*

Behind a white picket fence on an unremarkable suburban street, Eli Timoner is about to die. Just as he lived, he will do so surrounded by his loved ones, on his own terms. Lucky enough to live in one of the few states that allows medical aid in dying, the Timoner family embarks on a mission to help their beloved patriarch exit the world with the same dignity with which he lived. As the family opens up to provide an enlightening, often humorous, view of a universal experience, this intensely intimate film also offers a lasting legacy of one man's extraordinary life and his commitment to both living — and dying — with agency and grace.

*Last Flight Home* is now available on The Roku Channel, Paramount Plus, Prime Video, Vudu or Apple TV on your Roku device.

### Special Note:

Ondi Timoner has held screenings for Compassion & Choices supporters as well as lawmakers in numerous jurisdictions that are either campaigning to pass medical aid-in-dying laws. A special screening will be held at the Loft Cinema in Tucson on October 29.



**Choice & Dignity Mortality Movies,  
Film & Discussion Series**  
*Premier Event*



Join us for a  
**FREE** Saturday  
mid-day  
screening and  
discussion of  
this critically  
acclaimed film  
directed by  
Harry  
McQueen.

Sam (Colin Firth) and Tusker (Stanley Tucci), a couple for twenty years, are traveling across England in their old camper van visiting friends, family, and places from their past. Following Tusker's life-changing diagnosis of dementia, their time together has become more important than ever until his secret plan tests their love like never before. The film earned a 90% rating from critics on Rotten Tomatoes.

**When:** Saturday, November 4, 2023 from 10:30 am to 12:30 pm

**Where:** Eckstrom-Columbus Library, 4350 E. 22nd Street, Tucson, AZ 85711

A general discussion on Death and Dying will follow the film. Refreshments provided. No admission fee.

To attend, just let us know you are coming at:  
[ChoiceandDignityInc@gmail.com](mailto:ChoiceandDignityInc@gmail.com)



**EXIT CAFE**

It is sometimes difficult to find someone to talk openly about our fears and wishes about dying. In this social gathering, participants break up into small groups to discuss issues like: how do I plan for a peaceful death; how do I talk to a loved one about my end of life concerns etc. We may even make a connection with someone present to explore becoming medical power of attorney for each other. Feel free to bring a friend or family member.

**When:** Friday, Dec. 8th, 12:15—1:45 pm

**Where:** Dusenberry-River Library Meeting Room, 5605 E. River Road, NE corner

Open to the Public. Refreshments provided. No admission fee.





## MEET YOUR BOARD — J'Fleur Lohman, PhD

I remember with delight of our family's trip on the original Queen Elizabeth crossing the Atlantic. I was born in the Netherlands as WWII started. After the war we immigrated to the US and settled in NJ. I was the youngest of 6 and loved living in the US, free from bombing and homelessness and lack of food.

I met my husband, Tim, in high school, and we started dating the last month before graduation. He went to Cornell U. in NY State, and I went to Rochester U. in NY. After 2 years of traveling the 90 miles between us and writing lots of letters, we decided to transfer together and landed at the U of Ill. We married in our senior year and we both got our master's degrees. We raised 4 children there. Because we were both environmentalists, we decided we would only give birth to 2 children. Thus, we adopted two minority babies needing a home.

It was always my interest to be helpful to others, but it took me several vocations to finally figure out that I wanted to be a counselor. The professor I wanted to study with was here in Tucson, so we moved here in 1984 and I obtained my PhD in counseling. We loved it here. Tim was offered a professor position and I started my own practice.

When I was about 35, I started to think about death and dying. I soon found out about The Hemlock Society, and I have been an avid Right to Die supporter ever since. A friend asked me about 15 years ago to join her to meet John Abraham who was very involved with the local affiliate of Final Exit Network. I worked with John for many years. When Final Exit Network decided to close their affiliate program, our group decided to continue our right to die programs. We became a non-profit organization, Choice and Dignity, in 2021 and I have served on the board ever since.

When the pandemic hit and John Abraham, who was a thanatologist (the study of death), retired, we had to shut down our programs. Presently, I am working with other board members to re-work the presentations, and we will be offering some programs during this year. If you know of some people who might like to host one of these events, please leave a message on our phone or website, and we can work together to make this a reality.



## Choice & Dignity Board

President	James (Jim) Schultz
Vice President	Tracy Corbin, MPA
Treasurer	Susan Becker
Secretary	Margaret Molloy, MA
Member at Large	J'Fleur Lohman, PhD
Member at Large	Myriam Coppens, MA, LMFT
Member at Large	Sally Hall, MD
Member at Large	Laura Vandergrift

## Advisory Board

Steve Miller, MD	Phineas Anderson
Derek Humphry	Richard MacDonald, MD
Elizabeth Smith, Esq.	Colleen Whitaker, MA

## Board Meeting Schedule

October 14, 2023

(no meetings in Nov and Dec)

January 13, 2024

All meetings 4 – 5:30 pm AZ time, via Zoom

To participate, please send a note to

**[ChoiceAndDignityInc@gmail.com](mailto:ChoiceAndDignityInc@gmail.com)**

to request a Zoom link for the meeting

## Become a Member

We don't have a lot of expenses but it does take some money to keep things rolling around here. Please consider joining us.

Scan the QR code to go to our website

