

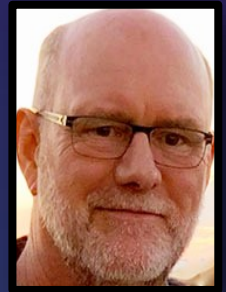
# I'm an oncologist. I have terminal cancer. And I support medical aid in dying. Here's why.

By Tom Fitch, MD

Remarkable advances in medical care are helping us all live longer. That also means more people are coping with advancing serious illness. The vast majority understand that they are living with a terminal condition, yet many of them, along with their families, are unprepared for the final stages of life. Relatively few talk with their doctors about the likely progression of their disease and options for their end-of-life care.

“Let’s try this,” becomes the default recommendation, and patients are commonly led down a path of relentless therapies of limited to no benefit. Tragically, more treatment too often simply means more suffering and reduced quality of life. With the expert end-of-life care available today, dying and death can be both meaningful and peaceful. But to believe all deaths are “natural” is just wrong.

I cared for cancer patients for more than 30 years, which included palliative and hospice care. I saw many agonizing deaths despite my best efforts, and it was not rare for patients to ask me how I might help accelerate their dying, which was not an option in either Minnesota or Arizona where I practiced. Now I too am faced with terminal illness. I have multiple myeloma and non-Hodgkin’s lymphoma, and despite aggressive care, I have not achieved remission so I am now planning for the end of my own life. I am prepared and accepting that I will die. But experiencing intractable pain and suffering as I am dying is something I want to avoid.



Dr. Fitch

Medical aid in dying (MAID) is legal in nine states and the District of Columbia, available to more than 70 million U.S. residents. It enables eligible patients to die a peaceful death at the time of their choosing. To be eligible for the law, patients have to be diagnosed with a terminal illness with six months or less to live. They must be mentally competent and able to self-administer the medication. Two physicians attest that they meet these criteria, and waiting periods are built in to prevent an impulsive decision. Although 56% of Arizona residents approve of this law, the bills which have repeatedly been submitted to the Arizona legislature have been consistently stalled. Opponents preventing this law from becoming reality offer many reasons for their resistance. It is in violation of “God’s will” they say, arguing that only God can decide when a person should die. Other arguments include possible abuse of the law or a fear that loved ones could be coerced to use it.

The fact is that after nearly a quarter-century of real-world experience in states where MAID is legal, there has been no evidence of the “slippery slope” or “increased societal risk” opponents routinely cite. We have seen no indication of a heightened risk for the elderly, poorly educated, the disabled, minorities, minors or those with mental illness. There has been no rising incidence of casual deaths and no evidence to suggest that MAID has harmed the integrity of medicine or end-of-life care.

One false narrative espoused by opponents – that “participation in MAID is suicide” – needs to be addressed. MAID participants do not want to die. They have a progressive terminal illness, and meaningful, prolonged survival is no longer an option. They want to live, but their personhood is being destroyed by their illness, and they want their death to be both meaningful and peaceful. None of this is true for people who die by suicide. Our diverse country and our Constitution forbid us from imposing our own religious and faith beliefs on others. When we do this, we are turning a blind eye from truly seeing the very real human suffering that is in front of us. MAID is not a challenge to God’s divine sovereignty but a challenge to the disease itself.

As my cancers progress, I too want the legal option to die at the time and under the circumstances of my choosing. I desperately want to avoid recruitment into that borderland where I would vegetate as neither here nor there. I ask those opposed to MAID for themselves, to respect my prayerful discernment and personal requests for end-of-life care as I believe it is consistent with my needs, beliefs and values.