

Aid-In-Dying Options: Finding One's Way to Clarity

The decision to consider an aid-in-dying drug is only one of the many considerations that need to be taken into account when facing the challenges of an irreversible, life-threatening illness. We believe that having such an illness creates an opportunity for discussion around end-of-life issues and possibly gives you time to make preparations. It may give your family much needed time as well.

We recognize that initiating this process with your physician and with the clinical consultant does not necessarily mean that you will use the aid-in-dying drug. In states with a similar law, approximately one-third of the patients who received a prescription for an aid-in-dying drug opted not to take the drug. They may have chosen not to use the drug for a variety of reasons, including never reaching clarity about what to do, changing their minds, deciding to allow the disease process to take its course, adequate symptom control, dying from the disease or other reasons.

Considering the use of an aid-in-dying medication is a major decision that includes a multi-layered and complex process — one that likely affects far more than one person. Perhaps more than any other major life decision, this one is also infused with matters of moral, ethical and spiritual values — values that one may not even share with those nearest and dearest to them.

Sometimes, we may move toward those big life decisions with distinct clarity and certainty, but at the last minute, we might discover: “Oh, I really can’t marry you,” or “I really don’t want to take over the family business.” Discovering our heart’s true intentions can be an ever-evolving journey. Just when we think we are certain, another layer gets pulled back and reveals a deeper truth. Trying to sort out and decide if this is the best option for you and your loved ones will involve a similar exploration.

It is not unusual to hear some patients, feeling so ravaged by treatments, express deep frustration and weariness: “OK! That’s it! I’m done. No more!” Their physician might then say, “But there’s this drug trial coming up.” And the patient’s response might then be, “OK, I’m in!” We don’t always know our own truth until our circumstances demand that we reevaluate.

This may apply to your loved ones and family members as well. It is quite possible that they may have their own hesitations or conflicts in participating in this option. Or, they may honor your choice and want to support you, but they still have their own reservations or struggles.

This is a time for deep reflection and even deeper communication for all those concerned — sorting out possibly competing values in order to arrive at the best choice for you. Please take that time and venture into those conversations with yourself and loved ones. That heartfelt truth-telling may offer its own guidance and clarity to each of you. It is our hope that by talking through this process — potentially many times and at different points in your treatment and illness — and thinking about all of the options available, you will discover your best path.

Questions to consider for reflection:

- What circumstances brought me to considering this option?
- What fears might I be bringing to this decision-making process?
- What expectations might I be bringing to this decision-making process?
- Which values would be primary to me in considering this option and making this decision?
- Which of my values might be in conflict with this decision?
- Whose values in addition to my own do I need to consider?
- If I exercise this option, what might I gain and what opportunities might I lose (e.g., for healing, personal growth, relationship to others)?
- If I exercise this option, what might my family gain and/or lose (e.g., time with you, opportunity to provide you with care, healing, conversations, personal growth, relationships)?
- Can I offer loving allowance to myself and those around me to have conflicting feelings and values?

These will likely be ongoing conversations with yourself and loved ones, until a decision feels right. Take advantage of professional support and guidance to facilitate this process. Your clinical consultant can be an essential guide in the process. Other resources to consider include an interfaith chaplain, your spiritual community, your loved ones, support groups, your physicians who know you, or a therapist. It may also be a more private discussion with yourself and those most close to you.

Always keep in mind that moving through the process of qualifying yourself to receive the aid-in-dying drug never obligates you to take it. The End of Life Option Act is here to provide one more option for you at end of life.