

60 REASONS TO SUPPORT NEW YORK'S MEDICAL AID IN DYING ACT

Ed O'Connor

Following his brother-in-law's death, saw his sister struggle with limited end-of-life options

Milan, New York



Reason #7

So that no one's sister has to research the best way to take her own life.

It was difficult to watch my wife, Patty O'Connor, lose her brother Jim the way she did. In talking to friends and family about this loss, we were offered a great deal of support. I can only think of one person who asked what could be considered an insensitive question: "How did he do it?"

The question was not asked in morbid curiosity, but in practicality. It was asked by my sister. Not long after Jim's passing, my sister was diagnosed with ovarian cancer. At the time of its recurrence, she began doing a great deal of planning, and making major changes due to her terminal diagnosis.

It is not surprising then, with all this planning, that she would ask about Jim's methods. She worked for more than 30 years aiding and supporting patients in a New York hospital oncology department.

Her experience has made her very aware of the reality of a terminal diagnosis. She knows quite well what ovarian cancer does, and how it ends. She has seen first hand that there is a limit to what doctors and medicines can accomplish.

Who could blame her for seeking end-of-life options as part of her planning?

I am grateful that my sister's passing does not come with a story of unbearable pain and suffering at the end. She received excellent care through hospice.

However, her last few months were filled with more fear and anxiety over what could have happened. She wouldn't take the full course or dosage of medications prescribed to her so she could have a stockpile that she could use if she needed to take matters in her own hands at the end. To me, this is unacceptable.

This is not the standard of care that New Yorkers or anyone deserves.

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