

## Death with Dignity

By Jerry Dincin

**B**altimore physician Dr. Larry Egbert is currently awaiting trial in both Arizona and Georgia, accused of assisted suicide.

The charges are unfounded. Dr. Egbert, a former Johns Hopkins professor, simply counseled patients with incurable diseases about their options as the end of their lives drew near. By talking to these folks, Dr. Egbert was fulfilling his responsibility as a medical professional.

To understand why, consider the plight of those suffering from Alzheimer's. The afflicted — including 86,000 people in Maryland — can expect a slow, painful descent into advanced dementia.

The moderate memory loss that marks the onset in patients will, over the years, deteriorate into inability to recognize close family members, dress themselves or remember significant experiences. Friends and family who are forced to witness their fall into oblivion suffer indescribably.

Given this bleak outlook, it's easy to see why some Alzheimer's patients choose to hasten their own death. It's also easy to see why Dr. Egbert was determined to help patients suffering from conditions like Alzheimer's and Lou Gehrig's disease make this difficult decision.

It is time for the world to recognize the right and the rationality for mentally competent adults in such circumstances to take their own lives.

As a practicing psychologist for 30 years, I have frequently worked to prevent mentally ill patients from ending their lives. But such a decision by a capable person stricken with unrelenting and intractable illness is a logical means of sparing the victim and others extraordinary misery and suffering.

Many find allowing people to take their lives morally reprehensible. In the abstract, the issue makes for interesting

ethical discussions. When we become specific, though, the need for action becomes more visible: That's your mother screaming in that bed, dealing every day with some terrible disease like Lou Gehrig's. She can look forward to a body that can't move, speak or swallow food, a life of total dependency on others for every act of maintenance.

We respect and support the choice of anyone with a disease such as Lou Gehrig's to continue enduring these conditions, as Stephen Hawking, the 68-year-old astrophysicist, does, continuing to enrich science from his wheelchair. But heroism has many forms, and those who know

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*Living with great pain and deterioration is courageous, but so is ending one's life under such conditions. Both choices should be honored.*

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their limits, who can face death in the eye and who choose not to stay alive via respirator and 24/7 care, are no less heroic.

Their form of courage should be honored without judgment.

Consider the 42,000 Americans diagnosed in 2009 with pancreatic cancer, a disease that is usually inoperable and accompanied by crippling abdominal and back pain until the end. All those patients will know is a future of intense agony followed by death. Some "life."

An aging nation means that these terrible diseases will become more common, and protecting the right to die with dignity, more urgent. For example, 5.3 million Americans are living today with Alzheimer's. By 2050, that number will be 16 million.

In a country where there isn't enough good health care for those who want to live, doesn't it seem insane to take those

who desperately want to die and force them to stay alive against their wishes?

Who are those who have the heart to consign these people to a living hell? If the patient were their mother, would they? Do we not have a moral obligation to spare these patients and their families unspeakable torment?

We as a society do indeed have that power, and it is time we gathered in numbers and exercised it. That's where my organization, Final Exit Network, comes in. We provide information and counsel to patients who approach us seeking to deliver themselves from torture and make informed choices. The impetus comes from within them; we do not "encourage" anyone. We go to great lengths to ensure that the person is capable of choosing rationally.

What we do is wholly different from physician-assisted suicide, since we never supply any equipment or administer any lethal chemicals. We are careful to keep our efforts within the law. That, however, has not prevented some local governments, notably Georgia and Arizona, from persecuting many of my colleagues — including our former medical director, Dr. Egbert.

Ending a life of unbearable pain and indignity is a basic human right. We at Final Exit Network provide compassion in the form of information and empathy, and we are proud of our work.

We hope that those antagonists who insist on making people suffer a few more days, weeks, or even years, will never themselves need to endure the horrors that they now force others to experience.

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