

Philip and Vanna Smith,

The Principal Research Officer,
Joint Select Committee on End of Life Choices,
Legislative Assembly of Western Australia,
4 Harvest Terrace,
West Perth, WA. 6004.

Submission on End of Life Choices.

We believe that everyone should have the choice of when and how they die at the impending end of their life, particularly if they are terminally ill or in unbearable pain.

It is totally unacceptable that, at present, terminally ill patients can have their wishes for a swift and painless death ignored and to be forced to have the choice of:

- suffering a long and painful death;
- of being drugged into insensibility until they cease breathing;
- or, of committing suicide.

Further, it is not fair on medical staff who may wish to carry out these wishes, even to a minor degree, that they have to be aware that it is illegal to do so. If it leads to the death of the patient, criminal or professional charges may follow.

What sort of example do legislators set when the clear messages to society are:

It is acceptable for the people we love to die in agony but it is "humane" to end an animal's suffering"

It is acceptable to drive the terminally ill to commit suicide by not allowing an acceptable form of relief. Palliative care is not always successful for extreme pain.

Here are some examples of our family's inability to provide a dignified death to our close relatives.

Vanna's grandfather, Les Scaddan, died in intense pain from internal bleeding. He was blind but had a brain like a "razorblade". When I visited him in his last days, he pleaded with me to find some way to put him out of his intense pain. No one could, or would, help.

Vanna's mother Sadie Latham, died from complications from a long bout of pneumonia. At the time, she was suffering from dementia. It was the family's wish for her suffering not to be prolonged.

Philip's mother, Gloria Smith, died from general deterioration of her body. She spent her last years in excellent care with regular visits from her families. But, because she was bed ridden, she considered she had little to live for and wanted to die, particularly when she lost control of her bodily functions.

We live 200 km from Perth and it is difficult for the family to sit by the bed side waiting for a loved one to die. How much more satisfactory to most it would be, for the patient to be

able to arrange the time of death so that loved ones could say their last good byes before they finally find peace at their own direction.

Please recommend that the terminally ill, or those in unbearable pain, be given the choice of how they can die with dignity and not have die in agony.

P J Smith

V L Smith

Philip John Smith

Vanna Lindley Smith.