

End of Life Choices

I have long been ideologically in favour of the right of people to end their own lives when they have become unbearable. But I would like to submit my own experiences to support that.

My husband, Michael Beilby, was a busy and productive person in spite of being a life long asthmatic. He had been a primary deputy principal and occasional acting principal up until his retirement in 1995. By the end of 2012 his asthma had developed via chronic bronchitis into COPD (Chronic Obstructive Pulmonary Disorder). He was down to about 20% lung capacity. He also developed Parkinsons Disease in 2012. In 2013 a drug called Mukamist which he used four times a day via a nebuliser became unavailable in Australia and his condition worsened dramatically. He had tried to keep fit but eventually could only walk a few metres before running out of breath. I bought a small wheelchair so I could wheel him from the car into his doctor's surgeries. I became his full time carer and had to help him dress, help him shower, help him into bed and out of chairs. If he fell over I had to get a neighbour to help lift him up as he couldn't manage himself and I couldn't lift him. From leading a busy active life he was reduced to shuffling from room to room and reading, watching TV or doing Sudoku puzzles.

He had three trips to hospital in 2013 but the treatments they gave him, including oxygen, didn't help. His specialist and his doctors admitted that he they could do nothing to improve his condition and that he was better off at home with me to care for him. However as he got weaker and weaker he was worried that he might have to go into hospital or palliative care. On his last visit he asked the specialist for a prognosis. Dr Brims replied that there was nothing that could improve his condition and all that could be done was to slow down the decline. Mike said, "So how am I going to die?" The reply was that he would get pneumonia and die. I found out later that his death would have been to effectively drown in his own lung fluids, slowly, agonisingly in hospital.

After his third visit to hospital, Mike had told me that he was going to take my mother's way out. (My mother had stopped eating and starved herself to death over about three weeks). I suggested there might be better alternatives. We both joined WAVES (now DWDWA) and after enquiries Mike joined Exit International.

He read Exit's Peaceful Pill Handbook and decided that Nembutal was the best choice for someone in his condition. At that time, the handbook contained email addresses of possible suppliers in China. He emailed several of these and one responded to say they could supply the drug at a cost of \$250 US for 10g of the drug. So Mike ordered and paid for the Nembutal online even though he was aware that to import the drug into Australia was illegal. This was a difficult decision for someone as law abiding as my husband but he was desperate.

Mike had discussed his decision with me and with our sons. None of us wanted to lose him but we could all see how rapidly he was deteriorating and how much he was suffering even though he wasn't in actual pain. His Parkinsons made writing nearly impossible but my son found an app on my laptop that allows one to make a video of oneself talking into the laptop screen. So he made a short video explaining his condition, how he intended to take the Nembutal when it arrived and that the decision was his and nothing to do with me or his sons. A minor complication is that my younger son is a vet and Nembutal is a vet drug that he uses every day. So Mike had to make sure that my son could not be implicated in any way.

When the drug finally arrived on the 30th of July 2013 I pointed out to Mike that now he had it he could decide when and if he wanted to take it. He just looked at me and said, "Tomorrow."

Mike knew the dangers to me if I were there when he suicided and he wanted me to go off shopping and to come home and find him dead. But I said that after 51 years of marriage I wasn't going to let him die on his own.

So on the 31st of July he followed his normal routine. I got him his cup of tea in bed, made him his breakfast, set up and organised his first nebuliser treatment of the day (which seemed to me a total waste of time but that was his decision) got him a snack and a cup of coffee. He did a Sudoku puzzle and when he got it out he looked up and said to me, "Good – I've got that out. I can die now."

He shifted to his favourite chair and mixed the drug into 150 ml of water. He drank down the mixture and then a glass of port. He lay back in the chair and went to sleep with me sitting beside him holding his hand. His breathing slowed and stopped and after a while a pulse in the corner of his mouth stopped and I knew he was dead.

To be sure I waited another half hour before calling for a GP from his medical practise. (The last thing I wanted was for the doctor to resuscitate him after all his efforts) The GP pronounced him dead and contacted the coroner's office. Two coroner's officers came up to Roleystone and spent the rest of the day questioning me and examining the video on my laptop. Finally (8 hours later!) they removed Mike's body, the laptop, the package the drug had arrived in, the two glasses and all his many normal drugs, inhalers and nasal sprays.

After I had called the doctor I had rung my son's vet surgery and asked them to tell him that his father was dead. This was to ensure that he could not be implicated in any way. My son immediately came up and spent the day supporting me. The officers and a detective who also came up were very understanding and respectful but it was extremely stressful for both of us.

Luckily for me Mike had organised everything so I couldn't be charged with helping him to commit suicide and I wasn't so charged.

Because of his strength and determination my husband died in his own home at a time of his own choosing with me beside him. He didn't have to choke slowly to death in hospital. Sadly he couldn't risk telling anyone but immediate family of his plans. And very, very sadly he couldn't risk having his vet son beside him when he died.

Mike shouldn't have had to break the law to obtain the drug. And I shouldn't have had the fear of a charge of murder hanging over my head for months after his death. And my sons should have been able to be with us both.

I very strongly believe that someone in Mike's position should be able to go to their doctor, explain their wishes (Mike's doctors were all very aware of his condition) and ask for a prescription for Nembutal. They should be able to take the prescription to a pharmacist and obtain the drug. Then they should be able to keep the drug beside them until they decide that the time has come. (I believe in places where doctor assisted dying is legal that many terminally ill patients never take the drug) And they should be able to have their family and friends around them while they die, if they so choose, without putting those people in danger of legal repercussions.

Margo Beilby