Human Services Committee Testimony of Oliver Brody April, 2015

Maggie Lake was my partner for the past 10 years. She was the mother of Norah and Hayden. She had three sisters, Katy, Liz, and Joanne. She worked as a nurse practitioner, and as an artist. She impressed all who met her with her warmth, her humor, her intelligence. She was invariably described as “vibrant” and “dynamic.” She adored nature, art, people. She died on January 16 of this year.

Maggie had mantle cell lymphoma, a disease of the blood. She was diagnosed in August 2006, and immediately began intensive chemotherapy, followed by an autologous stem cell transplant (1/2007). She had what appeared to be complete remission, and had 6 years of good health. But in February 2013 tests revealed that the cancer had come back.

She did not want another stem cell transplant. The first had been a terrible ordeal for her, and the second held the risk of added horrors. What changed her mind, finally, was her daughter’s pleading with her to do it, to live to see her children grow into their own lives, perhaps to see grandchildren. So Maggie made the decision to go through it again, and in September 2013, after another round of aggressive chemotherapy, received stem cells from her sister Liz, who, tests showed, was a “perfect” match.

In August 2014 Maggie’s cancer returned. The only options her doctors offered, more aggressive chemotherapy, another stem cell transplant, Maggie refused to take. There was one other option, a new anti-cancer drug that showed some promise, and she got on this regimen. But after several months, it became obvious that this new drug was not working for her. By this time Maggie knew she was going to die. She began the search for a doctor who would prescribe the lethal drugs for her. She was not determined to use them, only to have them in case. In case what? In case she was in intolerable pain. In case she found she couldn’t breathe. She didn’t see this, describe this, as “taking her own life.” She just wanted to be assured that she would not have to suffer needlessly.

She asked several doctors, some of whom outright refused, some of whom said they would, but then withdrew the offer. She asked several organizations involved in this issue if they could recommend a doctor, but none of them would. Finally she did find a doctor, two actually, who agreed to serve this purpose. It took a while to get appointments, when everyone was available, and when her health was not too compromised for her to travel. We met with the doctor, first one, then the other, and discussed what was involved. Maggie had a terminal diagnosis from her oncologists at Dartmouth Hitchcock. She stated her request, in so many words – “I want the drugs that will enable me to end my life.” The doctor provided her with a form to fill out, to sign in the presence of two witnesses, and to return to him.

Two weeks later, she returned to the doctor and made the request again. They discussed what this meant, what her other options were, and she said she understood what those options were, and that she still wanted to have the drugs. After another wait of 48 hours, the doctor wrote out the prescription, which I picked up from the hospital where he worked.

During this time, Maggie was meeting with me, with her children, with her sisters, discussing with all of us her decision, to make sure we understood what she was doing. She emphasized to us that she hoped she wouldn't feel the need to use the drugs, but that not having them increased her anxiety about what might happen.

She was in more and more pain, now, and breathing was becoming harder and harder. Hospice, and her primary care provider, gave her increasing doses, and different combinations, of pain killers, which did give her some relief, but also caused her to sleep more and more of the time, and to be less and less able to communicate when she was awake.

It may help you to understand Maggie, to know that much of her medical practice had to do with treating patients who were on pain medication. It was a continual battle for her to get these patients into pain-management clinics, because she felt so uncomfortable prescribing these drugs, knowing how prone they are to abuse. She was raised by a Christian Scientist, and her whole life she repeated the mantra "mind governs" that her mother had instilled in her.

She hated the confusion caused by the drugs, not being able to maintain the thread of a conversation. She took less pain killer, and that helped some. The pain was tolerable, and she was much more alert. But her breathing continued to get worse. And one day, she said to me, "Today is the day. Call my children and my sisters. I want them here."

When Maggie was still in relatively good health, she envisioned a new series of art works, and began to produce them. She happened to be walking in town one day, with her sister Katy, and they stopped in at a new art gallery. She got into conversation with the gallery owners, who offered to show her work. She enthusiastically embraced the idea, and got to work on the new art pieces. We'll never know whether having this project to occupy herself kept her living longer than would have been otherwise, but clearly she drew on resources we didn't think she had. In the last few days before the art was to be delivered to the gallery, Maggie got herself into her studio and sat there directing us in framing the pieces. And the day before the opening she insisted on going to the gallery to see her works hung. It was quite moving to watch her looking at her art, appreciating what she had accomplished.

Maggie was an extraordinary person. She touched many hundreds, perhaps thousands, of people, by her work, by her art, by her compassion and caring and love. She was a gift. She loved life. She didn't want to die. She made decisions throughout her illness, to accept some treatments, and to reject others. Having these drugs in her possession gave her great peace of mind. Having the ability to make this decision about her own death was a great comfort to her. Being able to use these drugs, when she did, meant, for her, that she wouldn't be struggling for every breath, any more. Her life has no implications for anyone else's. The value, the worth, of her life, doesn't say anything about anyone else's. The decisions she made about how her life would be lived, and how, or when, her life would end, send no message, to anyone. The doctors who prescribed the drugs for her did what their profession calls for. They were helpless to save her life, but what they could do, was to help her to relieve her own suffering, and to die with dignity.