

HEMLOCK SOCIETY OF SAN DIEGO

January 2017

www.HemlockSocietySanDiego

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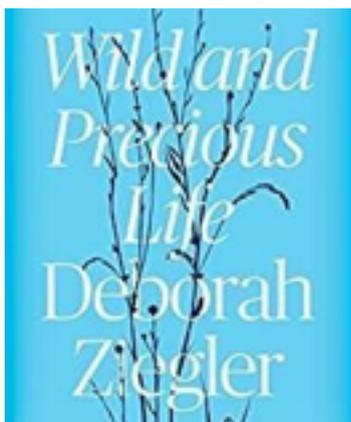
www.hemlocksocietysandiego.org

619-233-4418

PO Box 34237, San Diego 92163



BRITTANY MAYNARD'S MOM TALKS ABOUT HER DAUGHTER'S LIFE & CHOSEN DEATH



BRITTANY MAYNARD'S DEATH, USING THE LAW IN OREGON, MADE CALIFORNIA'S LAW POSSIBLE. DEBORAH ZIEGLER WILL TALK ABOUT AND SIGN HER NEW BOOK, "WILD AND PRECIOUS LIFE."

Sunday, JANUARY 15, 2017 1:30

Scottish Rite Event Center

1895 Camino del Rio South

Mission Valley

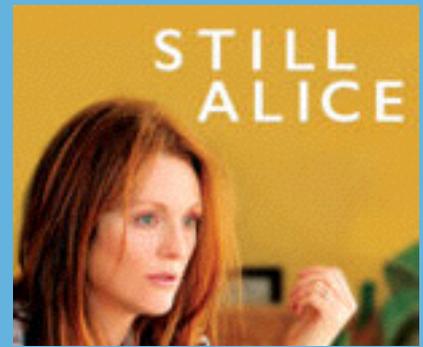
For more information call 619-233-4418
or visit HemlockSocietySanDiego.org

RIGHT TO DIE FILM SERIES

Our next free, provocative film will be **STILL ALICE**, the story of a young professor who develops early-onset Alzheimer's.

What would you do? How would your family react? What if you could no longer keep your job? Would you try to take

your life? How? How can you make sure it would work? Discussion to follow.



SUNDAY, FEBRUARY 19, 2017

1:30 Mission Valley Library
2123 Fenton Parkway next to IKEA
Parking Refreshments

WE NEED TO HEAR FROM YOU TO HELP ALL OF US



**INFORMATION
NEEDED**

One way we can educate ourselves is to hear from our members who have had experience with the End of Life Option Act (EOLOA), Voluntary Stopping Eating and Drinking (VSED) and Dementia. At the last meeting a member talked about her friend who used VSED. She told us it took 13 days but was peaceful. Another member furnished the excellent form about medications that is reprinted here on the next page. Her husband will be using the EOLOA.

So, please, if you have spoken to your doctor about the EOLOA let us know what the response was, including his or her name if you wish, what hospital they are with, and what they said. Same with hospices. There are 40 of them in San Diego; we'd like to know which are cooperating with the EOLOA. If you live in a retirement community and you have reliable information whether or how the EOLOA will be used, let us know. Do you know if Memory Care facilities honor directives asking to stop insisting on food and fluids to a patient with no interest in either and a directive to that effect?

Let us know by phone, or email or letter. See the information on this masthead.

HSSD SPONSORS NEW JFF FILM

We are sponsoring a new French-Israeli film, AMOR, at the Jewish Film Festival on two dates in February — the 12th at 4:30 and the 15th at 2PM. This San Diego premier will be shown at the Clairemont Reading Town Square 14. (This is **not** AMOUR, the beautiful French film. Tickets can be purchased at the JCC Box office from 12-5 weekdays or online. **The Discount Code:HEMSD17 for \$11.25 tickets.** Tickets for Amor can be found here: <https://tickets.lfjcc.org/?search=amor>. This is a San Diego Premier.

SUMMARY:Heartbroken and confused, a man must make a decision for the love of his life that may haunt him forever. Just prior to being married, Daniel's fiancée, Lila, was struck by a car, which left her paralyzed. Daniel left home, aimlessly wandering through Europe. Back home, he must decide whether Lisa's one request is something he is willing to do for her.

Following commentary by Prof. Mario Garrett, Hemlock folks can meet at Bombay Coast for a snack and informal discussion.

Dear Reader, This page is a little hard to read but invaluable when it comes to understanding about the drugs used in the EOLOA. It is graciously provided by a member and is from the Advance Care Pharmacy, 760-489-7077. www.AdvanceCarePharmacy.com,

The California law is silent on specific medication recommendations. The decision for which medication, the dose, and supplemental medications is up to your doctor. Be aware that the cost is usually not covered by insurance, including Medicare, and is borne out of pocket.

Preparing the medication takes time and planning. It is helpful to have a friend, family member, loved one or volunteer from an advocacy organization present to help you follow these steps. As a reminder, the law clearly states you must take the medicine yourself.

- Secobarbital (Seconal®): Sedative which was commonly used in Oregon until recently. It has a long track record and we know it is extremely effective. The price recently rose significantly. As of August, 2016, the cost is ~\$3400
 - Recommended dose is 10 grams (100 capsules each of 10 mg)
 - To prepare the medication, open each capsule and empty it into a container. Roll the capsule between your fingers to empty it, tap it against the bowl, or use a toothpick.
 - Mix with 3-4 ounces of room temperature liquid (water works) or mix with smooth applesauce, fat-free yogurt or pudding to mask the taste.
- Phenobarbital, chloral hydrate, morphine:
 - Recommended dose is phenobarbital 20 gm, chloral hydrate 20 gm, morphine 3 gm (or 6 gm if you are highly opiate experienced). This combination can only be provided by a compounding pharmacy
 - Mix in 3-4 ounces of water or juice
 - The chloral hydrate may cause a burning sensation in the throat. To reduce this discomfort, you might take 2-3 tablespoons of honey, a few swallows of Pepto-Bismol or benzocaine (Lanocaine®)
- Morphine
 - If you are not taking any opioids now, 1800 mg of liquid morphine might be prescribed. This is about 3 oz of liquid
 - Mix with a small amount water or juice, or drink it straight up. It has a slightly bitter taste
- Diazepam, propranolol, morphine, digoxin:
 - This protocol was developed in Washington 6/2016
 - Diazepam 500 mg, propranolol 2 gm, morphine 10 gm and digoxin 25 mg compounded from powders with Syrspend SF ALKA buffer suspension 1.5 g, mixed in 2-3 oz liquid:
 - Does not have the bitter taste other combinations do

What to expect after taking the medication(s):

Most people fall asleep within a 2-10 minutes and die within 15-120 minutes. It has been reported that some people take up to 18 hours to die, but this is very unusual. In these cases, they remained in a deep coma and did not suffer during this time

- Once a person is in a coma, they may snore, hiccup, gurgle, and have breathing pauses or irregular breathing. Loss of bladder or bowel control is extremely rare
- There are usually no physical movements once a person slips into a coma
- Death occurs when breathing stops and no pulse or heartbeat can be felt. Once this has happened, call hospice to report the death
- In rare cases (6 out of 991 in Oregon) patients who took the lethal dose of medication awakened. It is not necessary to call the ambulance or to take the patient to the emergency room. In all cases the patient was alert, not in pain and fully able to decide if they wished to take medication again. How you want to manage this possibility should be discussed prior to taking the medication

Who should be present?

It is your decision to invite which family, friends, and/or significant others to be present. We encourage you to include important people in this momentous time in your life.

VSED (VOLUNTARY STOPPING EATING AND DRINKING) NOVEMBER TOPIC

Our November 20 meeting was presented by Dr. Mitsuo Tomita based on an important conference he attended on the subject in Seattle. It is increasingly used by people who cannot or do not wish to access assisted dying. It is good for frail, very sick people who have lost interest, or cannot ingest, food and fluids and for people for whom this method seems more “natural.” Normally it takes about 2 weeks from the last fluid intake; the cause of death is dehydration, not starvation (which would take much longer if fluids are taken.) Some hospices and doctors will help by prescribing morphine in frequent and large doses which speeds the process.. Some consider it “suicide” and will not facilitate. It is important to have access to medical assistance to alleviate pain, mouth sensations of thirst, dry skin, anxiety, etc. As the process continues the patient becomes weaker and a caregiver is helpful.

One of our members described the death of her friend, another member, using this method. She said it took 13 days, that the patient was kept comfortable with hospice care and that she was seen daily by a doctor and nurse. She had had esophageal cancer so had not eaten whole foods for a while. Though in her late 80’s she had a strong heart and was able to keep going despite the absence of food and liquids for almost two weeks.

Unfortunately we do not have a video of this program.

Another view of this process is an account in the Final Exit Network newsletter (Feb 2016): This is an excerpt: *“The literature advised me that it wouldn’t be hard. They were wrong. It’s brutal. My loved ones are as agonized watching me as I am doing this.”* Data collected in a large study by Boudewijn Chabot indicated a hard death using this method in 25% of his sample.

THANKS TO OUR GENEROUS DONORS

We are grateful for all donations to HSSD; with permission we list those of \$100 or more. These — and your dues — help us bring excellent speakers, rent our space, pay our insurance, send this Newsletter, and contribute to other like-minded non-profits. We are a 501C3 so all memberships and donations are tax deductible. These are our angels for the past two months, with our gratitude:

David Gauss Faye Girsh Eleanor Lynch F. Lee Smith Tu-an Tran

LEAVE A LEGACY

Include Hemlock in your will or Living Trust. Make sure you specify:

HEMLOCK SOCIETY OF SAN DIEGO

Our Tax ID #: 33-046-7982

We are a 501C3 so all donations and memberships are tax deductible

OUR DONATIONS TO OTHER ORGANIZATIONS

Through your generosity we were able to help organizations whose mission augments ours: **ERGO** (Euthanasia Research & Guidance Organization), Derek Humphry President \$1000. \$500 to each: **Final Options Illinois, End of Life Choices New York, End of Life Washington, Death with Dignity National Center, and Exit** (Scotland). Strengthening these organizations helps all of us have more choice and control at the end of life.