

Your life. Your death. Your choice.

TALKING TO YOUR DOCTOR ABOUT DYING



All of us would like to die peacefully, but we can't do it alone. If you want some control over how you die, start talking to your family and doctors, and make your goals known – especially if you want the option of using Washington's Death with Dignity Act.

The two major strategies for peaceful dying are to keep the dying phase short and get optimal palliative (comfort) care.

If you have received a serious diagnosis, ask your doctor for accurate information about your prognosis. Physicians sometimes shy away from telling patients they are dying, especially when no one raises the issue. Ask for your physician's honest opinion about your prognosis so you can make informed decisions about your end of life. Asking questions such as "If you had my diagnosis and prognosis, what would you do?" may elicit a more honest response because the physician isn't put in the position of telling you what to do. Be cautious and make well-informed decisions about accepting any treatments offered that would extend your life while ruining your remaining quality of life. If you prefer quality over quantity of life, you should tell your physician.

If you are dying, let your doctors know that you understand your condition and wish to avoid any treatment designed to prolong your life if, in your judgment, doing so would prolong your suffering. A good way to start this dialogue is with a Physician Orders for Life-Sustaining Treatment (POLST) form, a document signed by you and your physician that can prevent unwanted life-sustaining treatment. Take a blank POLST form and your completed healthcare directive (also known as a living will) and durable power of attorney for health care and discuss the major points with your doctors. You might say to your doctor: "I know I am dying, and I appreciate all you have done to help me. But now my goal is to die peacefully. It's all right for you not to use treatments to prolong my life."

Another approach is to write a letter to your doctor stating your wish to avoid life-prolonging treatments, including, "I give you permission not to prolong my life." A simple statement like that will give you the necessary understanding with most doctors.

If you want aggressive palliative care (comfort care including pain or symptom control) at the end, let your doctor know your preference between relief of pain or alertness. For example, you could ask your doctor, "If I am having a lot of pain or uncontrolled symptoms, such as shortness of breath, will you be willing to give me enough medication to make me comfortable, even if it results in unconsciousness?" Your doctor may answer, "Yes, of course," but you have to ask the question to get the doctor's commitment. By doing so, you are signaling a desire for him to let you determine when

and how much pain medicine or sedation is enough, on an ongoing basis. Otherwise, he might assume you want the least amount of pain medications possible so as to avoid drowsiness or development of tolerance to the drug. And don't worry about broaching the subject in advance; both you and your doctor have a better chance of doing it right if you have had prior discussions.

Ask your doctor if she will be willing to give you enough medication to eliminate hunger or thirst if you elect to hasten the natural dying process by voluntarily stopping eating and drinking. Ask her if she will be willing to sedate you to unconsciousness if that is necessary to manage your suffering. Ask her if she will honor the same request from your health care agent or your family if you become incapable of making decisions. If she says, "Let's talk about that when the time comes," tell her: "No, we need to discuss it now." And remember, medical professionals don't like to commit to anything in advance; so they may hedge their answers. By your questions, your physician will know your wishes and will be more likely to honor them as the time approaches.

If your doctor hesitates or disagrees, give your reasons for and feelings about what you are requesting. If you cannot reach agreement with your doctor, you should find a new doctor. Ask for a referral to a physician who will honor your wishes.

If you get hospice care (which is highly recommended), ask the hospice nurse the same questions about palliative care at your first meeting. Hospice usually provides palliative care in your home and can help ensure that you remain in control (and out of the hospital) at the end of life. For more information about hospice, request our handout, **The Importance of Hospice**.

If you intend to use Washington's Death with Dignity Act, request our handout, Talking to Your Doctor About Death with Dignity. The conversation about using the Death with Dignity Act should be handled with preparation and care.

It's also important to make all your end-of-life wishes clear in advance with your family and caregivers. To facilitate this conversation, request our handout, **Talking to Your Family About Dying**.

Most importantly, **call End of Life Washington and request a Client Support Volunteer** who can help you achieve a peaceful death. There is never a fee for any service, and all contact with End of Life Washington is confidential.

All of the documents mentioned here and many other patient resource documents are available at our website: www.EndofLifeWA.org. For more information about end-of-life options please contact End of Life Washington.

Dying peacefully takes a little work. To have a good death, you need to be your own forceful advocate.