TALKING TO YOUR FAMILY ABOUT DYING

To ensure a peaceful death, you must talk to your family and others who should know your wishes. Even with the best medical care, you probably won’t be able to make all your medical decisions at the end, and you will want people you trust to make sure your wishes are followed.

Long before you need their help, you should begin talking with your family, preferably before you become terminally ill. They must know your wishes in advance for end-of-life care. The best way of doing this is to discuss your advance directives (living will and durable power of attorney for health care) with them. Children don’t like to talk about your dying, but it’s not threatening to say, “I have no intention of dying soon, but it’s important for you to understand my wishes – just in case something unexpected should happen.”

By going through your advance directives carefully, your family will know how you want to die. Talk about your wishes for treatment should you become terminally ill, incapable of making decisions, or permanently unconscious. Do this every two or three years, so that your family fully understands your directives and has opportunities to ask questions. Talking to your loved ones about dying also helps you know who will support you at the end of life. If you do not think your immediate family will honor your wishes, it is especially important for you to name someone else in your Durable Power of Attorney for Health Care who will act as your healthcare agent. Contact End of Life Washington for advice.

Tell your family your preference about dying in a nursing home, a hospital, or at home. Talk about hospice care. If you want no artificial life support, such as a ventilator, feeding tube, or antibiotics for pneumonia, clearly say so. If your family fully understands your wishes well in advance, they will almost certainly follow them.

Talk about palliative (comfort) care. If you want maximum pain control, tell your loved ones you will want enough medication to eliminate pain – even if it results in drowsiness, unconsciousness, or hastens the dying process. If the medication cannot control your pain, tell them you would want continuous sedation to the end. These are not easy directives for
caregivers to carry out, so they must have time to wrestle with them in advance, not when there is an immediate need.

If you become terminally ill, be sure your primary caregiver and medical providers are very familiar with your advance directives and that you have a completed Physician Orders for Life Sustaining Treatment (POLST) form posted in a visible place.

Toward the end, when a reasonable quality of life is no longer feasible and you are ready to die, you must let your family know this. They may not understand your condition or share your decision to let go. They do not want to lose you, and some of them may feel that the best way to show their love for you is to “help you” by trying to keep you alive or convincing you to continue living. Share with them your reasons and your determination to stop all attempts to cure the illness. Assure them that they and the doctors have done everything possible to reverse your course, and now it’s time to come to terms with your inevitable death. Remember, they are grieving for you, and grieving takes time.

CONCERNING THE OPTION OF HASTENING DEATH

Do not try to do this alone; you will need your family’s help. It is imperative to have someone knowledgeable advise you on the procedure, and it is highly recommended that you be on hospice. Contact End of Life Washington, and ask for help.

Should you choose to actively hasten your death by stopping eating and drinking or by using the Death with Dignity Act (DWDA), it is best to discuss this plan with all close family or friends, even though there is no legal duty to do so. Many families have reported deep appreciation for the opportunity to tie up loose ends and to be present with their loved ones when they died using the DWDA.

By now, you may have a good idea what your family thinks about hastening your death. If one of them objects, tell her you respect her feelings, and that she does not have to approve. Ask her to respect your wishes by not interfering. Even if an objection is based on religious or ethical principle and not just fear of losing you, she will usually come around to “loyal opposition.” In this case, the loved one is not only grieving, but also must set aside her scruples on the issue.

If you feel you must exclude a family member from your decision to hasten death because he or she will not honor your choice, understand that enduring family discord and complications to the grieving process could result. Unless this person is estranged from the rest of the family or living far away, it will also require careful concealment, and there is still a high risk that the person will find out anyway.