

FIVE WISHES PRESENTATION

We want our loved ones to be healthy and happy and live forever. No one wants to think of a family members becoming seriously ill. That would make us sad, depressed and uncomfortable.

But if we really care about others, especially those close to us, then we want to be there for them when they us the most. That is especially true when it comes to care at the end of life. Sometimes illness can strike and then it may be too late to find out what our loved ones want and what their wishes are. Experts agree that if people don't make their wishes clear in advance, they could well end up at the mercy of our health care system.

As a son or daughter, spouse or friend, you need to know how your loved ones want to be treated when they can no longer tell you themselves. It's important to know the kind of medical care they want, and expect from them, if they become very sick. Plus it is important for each of us to let our friends/ relatives know what we would want when we no longer can voice our wishes.

Before Five Wishes was developed, the discussion with a loved one might go like this.."Mom, may I ask you something? If you ever go into a coma, do you want a feeding tube or a respirator?"

How depressing.....No wonder no one wanted to talk about this...when dying is treated as a medical event, no one wants to discuss it. With Five Wishes, the discussion is a lot easier because the document shows you a series of choices your loved ones will have if they are ever

seriously ill. But remember you can't ask your loved ones to do something that you haven't done yourself. So fill out your own Five Wishes first.

So let's begin with a bit of a trip down memory lane and give some historical perspective.....

The right of a competent adult to refuse medical care, or what has been termed "the right to die" was established in two legal cases.

1. Karen Ann Quinlan was a young woman in her twenties and admitted to a hospital in NJ one night in 1975 – friends tried to revive her following at least 2 15 minute periods when she stopped breathing. Cause unknown = lapsed into what is called a persistent vegetative state (chronic state of brain dysfunction in which a person shows no signs of awareness – being kept alive only by mechanical means.

After months of hospitalization, dad petitioned to have her removed from the ventilator. Even though doctors and hospital testified this would lead to her death and would not conform to medical and ethical standards at the time, the NJ Supreme Court granted the petition. Lots of legal doctrines were discussed at the time – based on what was the standard of care....

Once ventilator was removed, she survived another ten years on artificial nutrition and hydration – finally dying in 1988.

Survival by persistent vegetative state patients can often be extended for long periods of time by artificial feeding.

2. Nancy Beth Cruzan – in 1983 was severely injured in an auto accident and was discovered lying face down by the road without a

detectable respiration or heartbeat. CPR was performed and she was taken to the hospital. She too progressed to a persistent vegetative state with virtually no chance of returning to a cognitive state. Her parents asked the hospital to terminate the artificial nutrition and hydration, but the hospital refused without court approval. A Missouri state court authorized removal of the artificial feeding, finding that in light of her conversations with her roommate at age 25, she expressed a wish not to continue life unless she could live “at least halfway normally”. However, the state supreme court reversed this decision, on grounds that the statements to her roommate did not provided clear and convincing evidence of her wishes.

In 1990 this case went to the Supreme Court, being the first so called “right to die” case to do so. Without going into all the legal issues re this case...the court assumed that competent patients had the right to “refuse lifesaving nutrition and hydration and that this right to die” was a constitutionally protected right. At age 33, the feeding tubes were removed and she died – 8 years after her initial accident.

This case drew the nation’s attention to the issue of prolonging treatment for patients with NO hope of recovering to even a marginal quality of life. Therefore, the Patient Self Determination Act was developed and passed in 1991. This act requires all health institutions to:

....ask an adult upon admission is they have a written advance directive

...document the person’s response

...provide written information to the adult about their right to refuse medical/surgical treatment under the statutes of the state and the policies and standards of that institution.

...maintain policies about a patient's right to refuse treatment and to have an advance directive

...provide education about advance directives to their staff and community.

3. During all this time and third case arrives...In Feb, 1990...let me pause a moment ...1990 year that the Cruzan case goes to the courts..

Terri Schiavo, 26 years old, collapsed at home with cardiac arrest. She was successfully resuscitated, but had massive brain damage due to lack of oxygen to brain and was left comatose in a persistent vegetative state. Over the course of years – there were 14 appeals and numerous motions and hearings brought by both her husband and her parents re continuing artificial nutrition and hydration...(this eventually destroyed the relationship between the husband and the parents) and went all the way to the supreme court. Terri eventually died in 2005 after feeding tubes were removed.

I share all that history to let you know that these conversations that we all need to have with our loved ones is critical and that we have ways to let those we care about know how we want to be cared for when we no longer can make those decisions ourselves...

Terms Surrounding Advance Directives:

Living Will = Power of Attorney = Durable Power of Attorney for Health Care = Legal Guardian.

History of Five Wishes:

In 1985 Jim Toney visited Mother Teresa's home for the dying in India. He saw how they were treated with dignity and love and there was a sign penned by her near the entrance which read "The greatest aim in human life is to die at peace with God."

Originally introduced in 1996 as a Florida only document – national version came in 1998..it is now available in 26 languages and in Braille. Wishes 1 and 2 are both legal documents. Once signed, they meet the legal requirements for many states...