

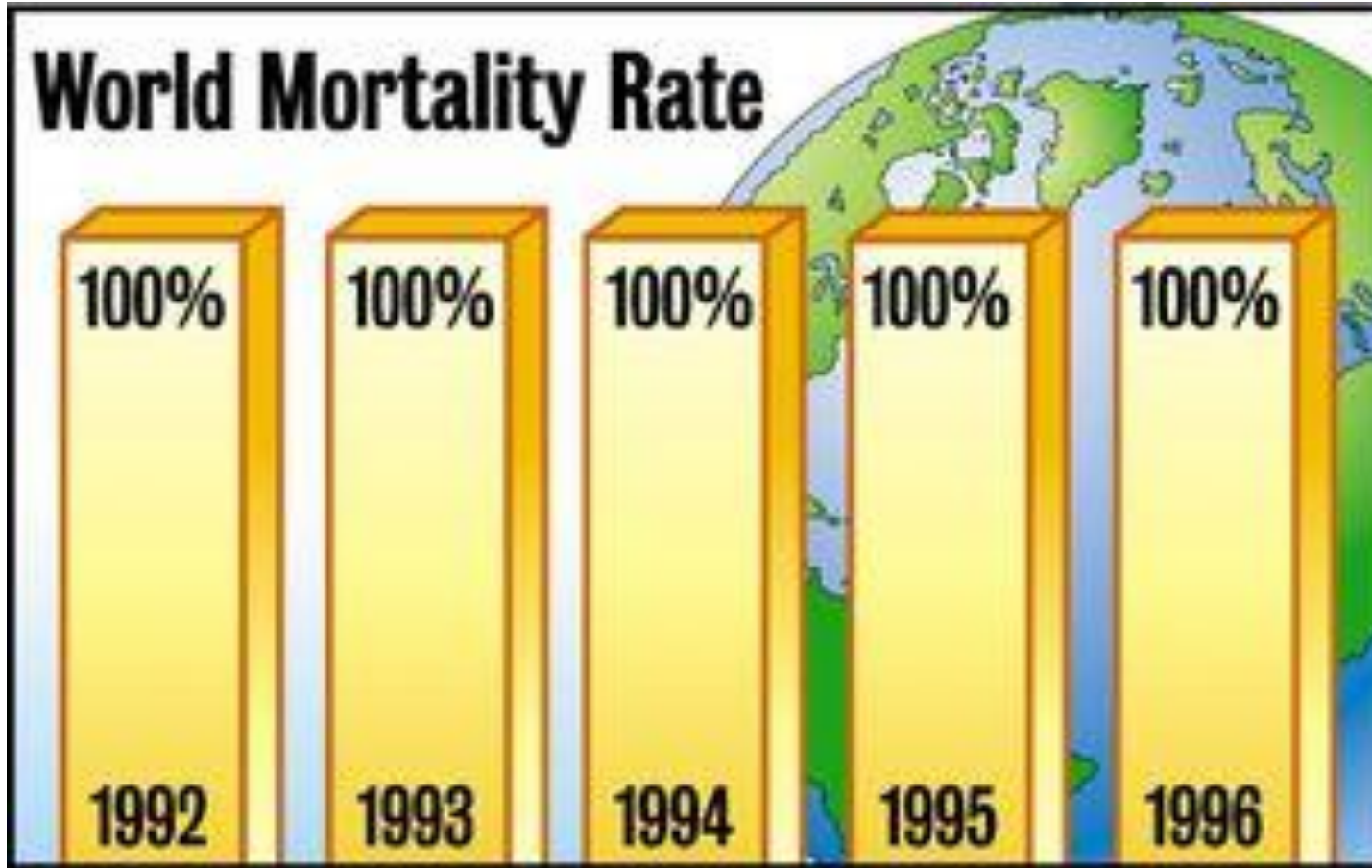
# **Preparing for the Inevitable Medical Aid in Dying: A New End-of-Life Option**

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Santa Fe Parkinson's Action  
Group Zoom  
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# World Death Rate Holding Steady At 100 Percent



"Unfortunately, it would appear that the death rate remains constant and total, as it has inviolably since the dawn of time."

Source: The Onion, January 22, 1997

# Our Right to Self-Determination: The Basis for Advance Care Planning and End of Life Options



- Guaranteed by the NM Uniform Health Care Decisions Act
- We decide what health care to start and if/when to stop it
- We can appoint a surrogate, proxy or healthcare power of attorney to act on our behalf if we lose capacity...this is a key to success!
- Gives us the “opportunity” for a good death...no guarantees
- The law is generally on our side
- Again, if we choose to do the work...so congrats for being here!

# Quality of Life vs. Longevity



- It is about our basic values...no right or wrong answer
- Most say they would like to die at home, peacefully, surrounded by loved ones, like many obituaries.
- Others may want to “die with their boots on”, trying all available care options until last dying breath.
- If we think it through, complete the paperwork, have the conversation with decision-maker, family, providers, etc. we might have it come out as we want it...whatever that is.

# What Is An Advance Healthcare Directive?

- A plan to make your treatment and end-of-life preferences clear if you are unable to make or communicate medical treatment decisions.
- Typically includes a living will and medical durable power of attorney and may include other documents

# Why Do We Need Advance Directives?



- Helps clarify your priorities, wishes
- Has legal authority - resolves questions and increases support of choices within family and medical community
- Brings peace of mind for the individual and family members
- Helps to minimize disagreements/conflict among family members and support systems
- Prepares for future (options the person wants may not currently be legal, but may become so in the future)

# Range of End-of-Life Options



# So, What Are These End-of-Life Options for “Thoughtful Dying”?

- Let nature take its course...whatever happens is OK by me
- Pursuing Life-Sustaining Treatments...die with your boots on!
- Refusing Treatment...I don't want to start that
- Discontinuing Treatment...I've had enough, lets stop that
- **Palliative Care/Hospice...when ready for “comfort care”**
- **Voluntarily Stopping Eating and Drinking (VSED)...hasten death**
- **Medical Aid in Dying...our newest option here in NM**

# Philosophy of Palliative Care/Hospice



- Self-Directed, Patient-Centered Care
- Focused on QUALITY OF LIFE (as defined by the patient)
- Treatment of Whole Person (Multidisciplinary Team)
- Family (as defined by the patient) included as Integral Part of Care

# Palliative Care Consultation



- Can start as early as the time of diagnosis of serious illness.
- Provided along side and complimentary of treatments to help with drug interactions and management of side effects.
- Does not require 6-month prognosis.
- Involves a collaborative determination of goals of care with patient, family and other clinicians.
- Management of physical, psychosocial and spiritual needs; focuses on quality of life and care options.

# Hospice is a Philosophy, Not a Place

**Hospice is the foundation of end-of-life care!  
Hospice is mostly in your home.  
Hospice is fully covered by Medicare/Medicaid**

**Do not wait until close to dying before enrolling!**

## Four levels of care:

- Routine care – Over 90% - Includes in home and in facilities
- Inpatient Care available for unmanageable symptoms
- Continuous Care for difficult symptoms
- Respite Care

# What Does Hospice Provide?



- Specialized and Individualized symptom management
- Medical equipment
- Medical and hygiene supplies
- Medications for terminal illness & comfort
- Physician, provider, nurse, hospice aide, chaplain, social worker, volunteers, others
- Bereavement program

# Voluntary Stopping Eating & Drinking (VSED)



## Why People Choose It?

- VSED is legal under Patients Right to Refuse Treatment Act.
- It allows a person to take control and to have time to say goodbyes.
- It allows a person to die at home as most people desire.
- One does not need a 6-month prognosis.
- No MD is required although medical care is needed.
- Sometimes considered by patients who don't qualify for medical aid-in-dying and wish to hasten their death.





# Expectations

- Time to death is usually between 5 days and 14 days with 10 days being average.
- Generally, vital organ failure and loss of consciousness begins around day 3 and progresses from there.
- After the first day or two, it is usually not painful, though it does take discipline to continue process and support to provide comfort care.
- Hospice may support from the beginning, or it may require a person to be in the dying process before providing services.
- This is NOT considered suicide and death certificates will specify underlying conditions.



# Dementia EOL Considerations/Tools



- Same basic issue: discuss with early stage patient and loved ones.
- Must get to core values...longevity (with certain, often slow decline) vs. quality of life by avoiding the late stages of dementia . A difficult conversation for all.
- Dementia Values Assessment and Dementia Directives aid the discussion:
  - Compassion & Choices
  - Dartmouth
  - VSED Handbook
- Hastening Death Options:
  - No treatment with palliative care only for common health problems, (broken hip, UTI, Covid, flu, etc.)
  - Planned, medically supervised, VSED, which can be specified in an advance directive

# Elizabeth Whitefield

## End-of-Life Options Act

New Mexico's End-of-Life Options Act provides for "medical aid in dying" (MAID) which is the medical practice wherein a health care provider prescribes medication to a qualified individual who may self-administer that medication to bring about a peaceful death.

The law went into effect June 18, 2021



# Who Qualifies To Use The NM Law?



- New Mexico residents
- Adults, 18 years or older
- has a terminal illness which means 6 months or less to live
- voluntarily make the request for MAID
- be able to self-administer the drug
- have capacity to make and communicate an informed decision

# MAID Is Totally Voluntary For All Involved



- There must be no coercion for the patient
- Providers may opt out.
- If a health care entity prohibits MAID they must post this policy on their website and other relevant materials to the patient.
- A healthcare entity cannot forbid an employee, off premise and outside of employment from providing MAID

# Unique Features of New Mexico MAID



- 48 hour waiting period after the prescription has been written before it can be filled
- Nurse Practitioners (NPs) and Physician Assistants (PAs) can be medical providers in addition to Physicians (MDs or DOs)
- Hospice Exemption: If a patient is on hospice then they have been determined to have 6 month or less to live so only one more provider is required to make this determination
- Only requires one written request

# Other Key Features



- If either provider believes the individual lacks decisional capacity there will be a referral to a Mental Health professional and MAID cannot proceed until patient is determined to have capacity
- Patient must have capacity on day of ingestion. MAID cannot be part of an advance directive or requested by a healthcare power of attorney.
- By law, “Medical Aid in Dying” is NOT to be considered suicide, assisted suicide, euthanasia, mercy killing, homicide or adult abuse. (“Assisting Suicide” remains 4<sup>th</sup> degree felony)

# Accessing MAID in NM



- Two providers must agree you qualify for MAID: A prescribing provider and a consulting provider...**if in hospice only the prescriber is required.**
- Once the prescription is written you may choose to fill it (or not) after 48 hours or keep it on file until you are ready to take it
- Patients have reported that having the prescription can bring them peace of mind and gives them a sense of control

# So, How's It Going?





- In the first four plus years over 900 ingestions that we know about. There are likely more!
- Several hospice agencies fully incorporating MAID, including prescribing; others providing supportive services during ingestions. Some have decided not to participate at this time
- More than 25 clinicians actively prescribing MAID medications throughout NM.

# End of Life Options New Mexico



- Formed in April, 2021
- Received federal designation as a 501 c 3 organization in 2022
- Maintains a cadre of more than 60 well trained volunteers some providing public education and outreach and others who assist individuals and families who request assistance with their end of life choices.
- We would welcome your support and our new website (<https://endoflifeoptionsnm.org>) has a smooth donate button!

# End of Life Options New Mexico

**Supporting End-of-Life Options for All New Mexicans**

endoflifeoptionsnm.org  
505-393-1321





### HELP US HELP OTHERS

**Support End of Life Options New Mexico**

We are a New Mexico not-for-profit organization. Our services are free of charge thanks to generous people, like you, who share our values and a passion for this important work. Now is the time to:

- Schedule an educational speaker
- Become a volunteer
- Make a donation

There is no better time than now to support our work. Your donation will provide the critical funds to grow and sustain a viable organization and give limited assistance to those who cannot afford the medications.



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### Your End-of-Life Options

EOLONM supports and educates about advance care planning so New Mexican's understand their rights and can consider all their options at the end of life:

- **Forego or Cease Treatment**  
Declining or stopping life-sustaining treatment
- **Palliative Care**  
Specialized care focusing on relief of symptoms and help with treatment decisions
- **Hospice Care**  
End-of-life comfort care, mostly in the home, focusing on quality of life and family support
- **Voluntarily Stopping Eating and Drinking (VSED)**  
Refusing any food or liquids to hasten death under medical supervision
- **Medical Aid in Dying (MAID)**  
Eligible adults requesting a prescription for life-ending medication from a qualified provider

### Elizabeth Whitefield End-of-Life Options Act



Judge Whitefield was a fierce advocate for medical aid in dying. Her difficult death in 2018 came prior to the passage of the Act that was later named in her honor.

Elizabeth Whitefield, JD

### Who's Eligible?


To qualify for aid-in-dying medication under the Act, one must be:

- A New Mexico resident;
- 18 years of age or older;
- Diagnosed with a terminal illness with 6 months or less to live;
- Mentally capable of making their own healthcare decisions, and,
- Capable of self-administering the medication.

Please visit our website or contact us to learn about the Elizabeth Whitefield End of Life Options Act. We'll respond quickly and professionally.

### We Work to Help...

- **Individuals and families** with advance care planning, educational resources, referrals and support as they decide about their treatments and end-of-life options
- **The public, community leaders and the media** be informed about end-of-life issues
- **Healthcare professionals** access education and training, and support them so they can provide the care and services their patients want
- **Healthcare systems & hospices** as they support their patients' end-of-life choices
- **Patients and families** access the new medical aid in dying law

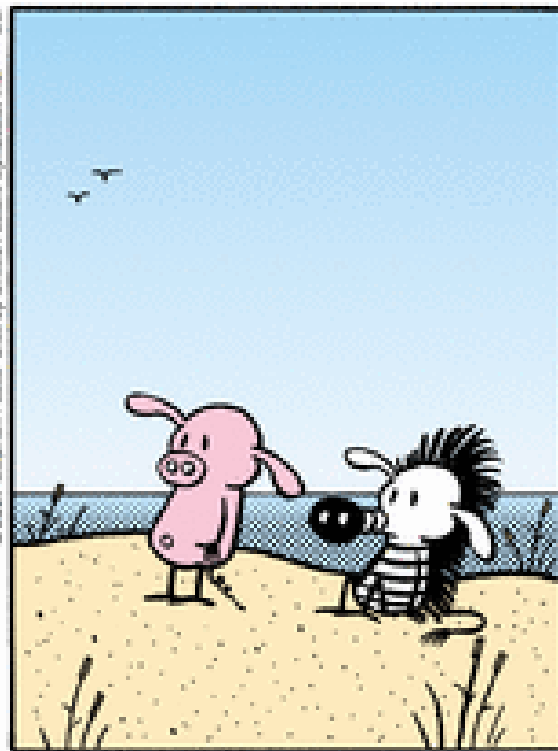


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# Let's Talk...Questions? Comments?



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**THANKS FOR PREPARING**  
**May The Journey Be Good to You**  
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