

**Testimony of Lani Graham, MD, MPH
In Support of LD 613
An Act to Amend the Maine Death with Dignity Act to Ensure Access by Qualified
Patients
Presented by Representative Meyer**

Before the Health and Human Services Committee, April 11, 2025

Senator Ingwersen, Representative Meyer and Members of the Health and Human Services Committee, my name is Lani Graham. I am here in support of LD 613 as a physician, as a friend and family member of people who have died, and an older person who is increasingly at risk for the illnesses that might take my life. This bill does exactly what it says it will do. It ensures that the very small minority of people who become eligible through process established by this legislature to end their imminent dying process in the company of their loved ones, are not denied that opportunity when they need it most.

As a physician, I have attended dying people in all stages of their progress toward death. It was always the hardest part of being a clinician. I always wondered if I could have done more to relieve suffering, to help with difficult decisions along the way, and to be sure I understood what my patients wanted at this very important time in their lives and in the lives of their loved ones. For part of the time, I took care of patients, there were no “do not resuscitate” orders and we would resuscitate patients over and over often against the wishes of the patient and the those who loved them. I remember admitting the same woman of 77 into the Intensive Care Unit multiple times with the woman begging us not to resuscitate her if her heart failed. The law did not allow that, so we continued.

Fortunately, there are other options for that now. And this legislature has allowed patients who are suffering and close to death to go through a thorough process, allowing them to have the option of ending suffering in the company of their loved ones. These efforts have meant much to physicians and patients alike. Just knowing the option is there has meant much even if it is not chosen. But tragically, there are some who have gone through the process and yet cannot take advantage of it because death comes too swiftly. Seventeen days is a long time to continue with suffering and perhaps end your life alone when you and your loved ones had a different plan.

Last summer I attended the death of my oldest friend. She was diagnosed with pancreatic cancer in October of 2022. She died alone in her home in July of 2024. Early in her treatment, she had asked me about options to end her own life as she had been told that it was very likely she would die. When I explained the process to her, she was not sure if that was what she wanted. She never raised the subject again. She chose not to take most pain medication. She wanted her mind clear, so she suffered stoically with the pain. She met death on her own terms, and I was completely supportive of that choice. But she would have been a good candidate had she wished to become eligible. And as I watched her go through those final weeks, she could have changed her mind, and yet would have

been unable to exercise that choice. This bill would have allowed her to change her mind as she experienced some of the hardest parts of dying and felt herself losing contact with those she loved.

I am a woman who can expect that like my friend, death is closer. All causes of death increase with age. That is particularly true of cancer¹ which tends to cause lingering deaths associated with significant pain as my friend experienced. It would mean much to me to know that option was available if I chose it.

This bill makes a very small but significant change in the current process. I hope you will unanimously vote ought to pass.

¹ <https://www.cancercenter.com/community/blog/2023/06/cancer-risk-by-age#:~:text=By%20and%20large%2C%20the%20biggest,in%20between%20ages%2035%2D44.>