Introduction

Elizabeth utilized the services of "DIGNITAS – To live with dignity – To die with dignity" (abbreviated: "DIGNITAS") in November 2017. She engaged in a Swiss legal physician-supported accompanied suicide after making the decision that she did not want to live out her life with Alzheimer's Disease.

Following Elizabeth's death, her daughter Debra, a psychologist from the United States, wrote two blogs about her family's experience. The first, **"*Alzheimer's Disease: What it's like to see it coming*",** highlighted the family's experience as Elizabeth began to show cognitive decline which was followed by a diagnosis of Alzheimer's Disease. The blog highlights the decision-making process of Debra and her father as they became aware that Elizabeth desperately wanted to end her life.

The second blog, **"*Choosing death with dignity in the face of Alzheimer's Disease*",** describes the journey of Debra, her father and her mother as they contact DIGNITAS, complete the necessary documentation, and travel to Switzerland with their entire family for an accompanied suicide.

These blogs were first posted on *Havingyourvoice.com*, a website created and hosted by Dr. Mark Peterson, a retired psychologist from the United States. The website provides readers with valuable knowledge to be able to make informed end of life decisions. *Havingyourvoice.com* also provides the resources and tools to make sure a person's voice is heard and the decisions that have been made are honored even when the person is no longer able to make decisions.

Dr. Peterson has published an eBook: "YOUR LIFE, YOUR DEATH, *YOUR CHOICE*: How to Have Your Voice to the End of Your Life" which is available at the website.

Dr. Peterson and Debra have granted permission for the blogs to be posted on DIGNITAS' web site. They wish to acknowledge the assistance of Carol S. Peterson, MSW in editing the blogs.

First Blog: Alzheimer's Disease: What it's like to see it coming

My mom was willing to take risks, was always up for an adventure, and lived life to the fullest. She rode a motorcycle, took in foster children, and enjoyed skinny dipping. She loved to read, play games, do jigsaw puzzles, kayak, hike, and ski. At mid-life she took up running. She was not particularly fast, but she loved the camaraderie of races. She ran her first marathon the year she turned 50 and proceeded to run nine more. She moved on to sprint triathlons. She won medals in the National Senior Games in tennis, swimming, and triathlon events. Once she retired from actually running marathons, she took great pride in volunteering. For 15 years, she never missed a Boston Marathon and took immense pleasure in draping medals around the necks of the finishers. She was there the day the bombs went off and instead of running to get away, she looked to see how she could help. She was 73 years old at the time. My mom enjoyed being with her family, friends, co-workers, and new people she met along the way. She laughed and told stories. She faced life head on and didn't back away from a challenge.

Mom's independence was sacred to her and she was clear she never wanted us to choose to keep her alive by life support or other medical intervention. If her time was up, she would rather her life end, than live in a compromised manner. As she grew older, she also came to a place of satisfaction and contentment. She said, "If something happens to me, I am ready to accept death. I have led a great life and when my time is up, I will be okay with that."

The impact of Alzheimer's Disease starts out small and grows insidiously over time. I had glimpses of concern about Mom's memory, but I was moved to action after walking with her on a snowy Christmas afternoon in 2012. Over the course of the 20-minute walk, she told the same story twice. Repeating stories was not new for my mom, but this time, I realized she had absolutely no awareness that she had already told the story and the time frame was so short. As she moved off to walk with someone else, I caught up with my dad and told him I believed it was time to get her an appointment with a geriatric doctor to assess her memory. He recognized she was forgetting more and more, but said he simply chalked it up to old age. He agreed to make an appointment.

After the assessments and follow-up, the doctor determined that Mom's memory was compromised, and a decision was made to start her on a medication, with the hope that it would slow the cognitive decline caused by dementia. Her doctor let my parents know that the medications only help 50% of the people who take them. My mom was 72 years old at the time and it was another four years before she was officially diagnosed with Alzheimer's Disease.

Over those next few years, I noticed a progressive decline in her ability to engage in tasks that used to come easily to her. Although she had been in two book clubs for years, she now found she was often confused. She asked three close friends to form a smaller group with her. Her coordination was off, making her previous daily ritual of exercising almost nonexistent. In addition, she had always managed the family finances, but my dad started having to monitor the situation more closely. Bills were not getting paid, the accounts were not able to be reconciled, and she was getting upset by her own confusion and lack of ability. In addition to challenges with daily tasks, we also were seeing changes in her personality. She was quicker to anger, was becoming suspicious, and was increasingly anxious.

On Christmas day, 2015, about a year prior to my mom officially being diagnosed with Alzheimer's Disease, an event occurred that solidified for me that she had become a different person than the mom I had always known. We all had agreed to a nighttime walk on the beach to watch the full moon rise

over the ocean. As we were walking and it was getting dark, my mom became more and more anxious. She was concerned we would not find our way back, that we would miss the trail, and that we might end up stranded there for the night. We eventually were forced to turn back to alleviate her anxiety. This was the kind of adventure my mom had always relished. I remember feeling a sense of loss and sadness as I realized that before too long, we may no longer see any of the crazy, carefree, adventurous spirit that had always epitomized my mom.

Although there were many indications to us of my mom's decline, she had limited self-awareness. She agreed she was having some trouble remembering things and she had been willing to start the medication to see if it would help. She knew that life had become a lot harder for her and she often felt frustrated by newfound limitations. However, we found that talking about those limitations created even more consternation for her. When she was faced directly with the changes that were happening, she would become disheartened, sad, and even at times, feel a sense of shame. Given this, we tried to find subtle ways to support her and her dignity. For example, when I was visiting, I would cook with her and would make much more than they needed so extra meals could be frozen, we tried to be careful in conversations to keep topics simple so that she could stay engaged, and as jigsaw puzzles became increasingly difficult, we progressively shifted to puzzles with larger pieces so she could still have success. We found adult designed puzzles with kid sized pieces, making the change less obvious.

A friend with expertise in working with adults with dementia encouraged us to explore day treatment, stating that if we waited too long, my mom might be too anxious or uncomfortable to accept this option in the future. Mom had been clear she would like to have more to do during the day, so she agreed to take a tour of a facility to see if it was a place she might enjoy, for even short periods of time. We talked about how perhaps she could help the other members by playing cards with folks. I thought if she could go in as a "helper" for some time, then she might be more comfortable going there as she became more dependent. Throughout the tour Mom repeatedly asked where the bedrooms were. I remember wondering why she kept asking, but simply continued to reiterate that no one sleeps there. She didn't express any concerns to me and seemed open to the idea of going to the program sometime in the future. I later found out however, that she was convinced my dad and I were working together to get her "put away" in a home. Nothing we said could persuade her otherwise. It seemed we had waited too long to have her get comfortable with a place before actually needing it. We could clearly see the wariness and suspicion that often comes as Alzheimer's Disease progresses.

At this point in the process, a standout concern had become Mom's driving. Although she had decided to stop driving at night because she felt uncomfortable, she was not willing to entertain the idea that driving during the day might also be a problem. Driving gave her freedom and my mom's need for freedom was essential to her core. Taking away driving would be a huge blow to her independence and sense of self. At the same time, letting her continue to drive put her life and others' lives at risk.

For those of you already coping with a loved one with dementia, you probably have seen for yourselves that most of these situations are not clear cut. When and how do you draw the line? Who makes the decision and who tells the person? For us, my mom's eye doctor set the limit. Mom had raised a concern with him about her vision and prior to her appointment, my dad called the doctor to express his concerns about her driving. At the appointment, the doctor told Mom she could not drive until she had an MRI. Even though the directive came from her doctor, Mom still ended up blaming my dad. She was filled with anger and resentment and to our dismay she pushed back on the restriction by driving anyway.

I watched in angst as her relationship with my dad was faltering and she was putting herself and others at risk. By having her doctor tell her not to drive, we were trying to protect her emotionally and also salvage her relationship with my dad; however, I now wondered if a more direct approach would be more effective.

After asking some questions, I found that Mom did not remember ever hearing a diagnosis from her doctor. I encouraged her to call and ask. The nurse who answered the phone told Mom she has dementia. I hoped with a diagnosis, we might be able to talk logically about her life choices. Instead, immediately upon hearing "dementia", my mom was consumed with grief, loss, and feelings of hopelessness. Although the nurse had not said, Alzheimer's Disease, Mom immediately associated "dementia" with Alzheimer's. Years ago, Mom had read the book, *Still Alice*, and she viewed Alzheimer's as the worst way for a person to spend the last years of his or her life.

Mom immediately started making comments about no longer seeing a reason to live. It is important to mention that my mom was a school psychologist and had often spoken with passion about the pain of suicide for friends and family of the deceased. She felt strongly that suicide is never an acceptable option. After saying to me she no longer wanted to live, she quickly added that she would not kill herself. She was clear however, that she would rather die than continue on. She was feeling hopeless and looked despondent. As I asked if she would be willing to see a counselor, her energy rose slightly as she vehemently stated, "Why would I do that? My life is over. No one can fix dementia. I am done." All I could do was sit quietly with her while she contemplated life ahead. I had been focused on trying to find a way for her to accept the loss of driving, but instead my actions seemed to have sent her into a state of despair.

As much as it was heartbreaking to see her in such distress, I believe she needed to hear and understand what was going on for her. Prior to this point, she was feeling confused and upset, but did not understand what was happening. Now she could understand; however, it also meant clarity about the fact that she was not going to get better.

This conversation happened over Thanksgiving weekend, 2016. By the end of the weekend, she asked me to help her craft an email to friends and family letting them know her diagnosis. She told people she would no longer be using email as she had been struggling with it anyway. She added that she wanted to apologize now if she ever saw any of them in the future and did not recognize them. She ended the email by giving people her phone number and mailing address for any future communication.

In January 2017, we met with a neurologist and were shown several scans of Mom's brain that had been taken over the years. One could clearly see there was more and more white space in each successive scan, meaning less and less brain. Although we already knew mom had dementia, my dad asked if the findings showed that the dementia would now be identified as Alzheimer's Disease. The doctor nodded and went on to tell us to expect Mom to eventually forget to engage in self-care (showering, brushing her teeth, going to the bathroom, etc.). The doctor could already see Mom was having trouble with balance and was dragging her feet slightly. She said we should plan on getting extra help at the house because Mom would eventually need round the clock care.

At this point Mom had already tried both of the medications that can help slow the progression of dementia and neither seemed to make any difference for her. The message was clear. There was nothing we could do to stop the progression. The illness would slowly take over all of her functioning.

I had heard that sometimes as people regress with Alzheimer's, they may get to a place where they are no longer bothered as much by the changes. They shift from being angry and distressed, to being pleasantly oblivious. Although I hoped this would happen for Mom, it never did. She continued to feel hopeless and her desire to end her life became even stronger. She was sad all the time and stopped even trying to engage in conversations.

As her talk of suicide became more and more prevalent, I finally decided it was time to at least explore any options that might be available to her. I felt so torn. How could I give her information about ways to end her life? What did that say about me? I didn't want her to make this choice, but how could I sit back and watch her suffer? My discomfort was palpable.

On a Sunday in March, back at my own home, a few states away, I shut myself in my bedroom and began a computer search. As I started to type, heat rose to my cheeks and tears began to fall. My fingers slowly punched in: Legal ways for a person to commit suicide in the United States.

I found no answers. There were some states that allow for a person to legally end one's life with the help of a doctor if the person has a terminal illness and only six months or less left to live. First off, my mom did not live in any of those states and even if she did, Alzheimer's Disease is not considered a terminal illness. The statistics show an average life expectancy for someone diagnosed with Alzheimer's to be 8-10 years after an official diagnosis.

As I continued my search, I eventually found "Dignitas – To live with dignity – To die with dignity", a Swiss nonprofit organization focused on helping people live and die with dignity. It seemed Dignitas could potentially be an answer. Foreigners were allowed to use the service; the costs were not prohibitive, and it appeared that Mom might meet the criteria. I found that on average, it takes three to four months, sometimes more, from the time a person makes the initial request to the point where the person actually ends his or her life.

Although there now appeared to be an option, the likelihood that we would go down that road seemed remote. The idea itself and the experience of thinking about it felt surreal. Could it really happen? Would it really happen? Since it seemed so unlikely and I was still struggling with the fact that I could even consider such an idea, I kept it to myself. I also recognized the only way I could feel comfortable with this solution would be if Mom tried every other option to feel better. I decided I needed to work harder to get her to see a therapist.

When I again broached the idea, Mom was more amenable and agreed to meet with a psychologist. She quickly made a strong connection and even became willing to try anti-depressants. I had high hopes that perhaps Mom would settle into a feeling of acceptance and be able to find some joy again in life.

To my dismay, this was not the case. Mom remained anxious, on edge, and quick to react with anger towards my dad, while at the same time desperate to have him at her side all the time. By now she was no longer able to participate in any of the activities that used to give her pleasure. She couldn't put puzzles together, engage in conversations, understand what she was reading, or play the kinds of games she used to enjoy. She struggled to understand television shows and was unable to prepare even a simple meal.

To her, the loss of being able to cook seemed to represent her inadequacy even more than others. Perhaps it was particularly hard because dinner time is also "sundowner" time which I learned is often

a period of increased agitation for people with Alzheimer's Disease. Night after night, my dad would tread carefully, knowing that if it appeared he was helping her with dinner, she would react by yelling at him, walking away from the meal, and sometimes even storming out of the house. Given these issues, they often ate at a restaurant or brought home take-out.

Despite having the support of a psychologist for a few months, Mom continued to feel a strong desire to end her life. She was in such emotional pain that I could no longer be a soothing force for her. By this time it was early May and I decided to look more closely at the possibility of Dignitas. I needed to make sure going to Switzerland to end her life could truly be a possibility for my mom. I was pretty certain the idea would be appealing to her and knew it would also be devastating to think she had an out only to discover she didn't qualify.

I reviewed the Dignitas website and found she needed to be diagnosed with a terminal illness, have an unendurable incapacitating disability, or experience unbearable and uncontrollable pain. She also needed to be "of sound judgement."

I wondered if this could work. Would the Alzheimer's diagnosis automatically disqualify her from having "sound judgement?" Would they consider her emotional pain and suffering and her inability to do so much of what she used to do, "an unendurable incapacitating disability?" I sent off an email with my questions.

Dignitas quickly responded with information suggesting this path could be possible. Alzheimer's was not a rule out relative to being able to make sound decisions; however, they were clear that people with Alzheimer's do eventually lose this ability. Consequently, a person must pay close attention to the progression of the disease in order to make the decision when it is still possible. If we waited too long, Mom may no longer be able to exercise this option.

I shared the Dignitas details with my dad and wondered with him if we should bring it up to Mom. Dad let me know that Mom's psychologist had recently asked her to bring us together for a family meeting. He and I decided that the session would be a good time to share with her what we knew about Dignitas.

On Friday morning, in early June, we met with the psychologist. In the office, Mom was quietly sitting across from me, her head bowed, white hair sticking out in all directions. She looked so frail; wearing multiple layers for warmth. The psychologist let us know she called the meeting because Mom had recently made an attempt to end her life and was planning to do it again. She was clear that Mom wanted to die and was going to try again. As a professional, she was obligated to contact the authorities; however, she believed that would not be in Mom's best interests. Instead, she convinced Mom to wait until we had this meeting; she felt it was important for us to know.

Although I had also been looking into suicide, I was dumbstruck. I knew Mom had been feeling hopeless, but I believed she would not actually try to kill herself, especially without telling us. She had always been so against it. At the same time, I understood. She had repeatedly told us she did not want to live if she had to live in a diminished capacity and this life she was leading was certainly diminished.

Dad and I said we understood her feelings and, hard as it was, we could support her decision. The impact of Alzheimer's Disease was apparent in that Mom seemed so surprised that we would agree.

Here was this woman who always had made her own way in the world. She was not one to easily be swayed. From my perspective, how could we not agree?

The psychologist started to talk in detail about what Mom would need to do prior to committing suicide. She said she needed to make a video saying we did not influence her. She said we could not be in the house when she does it; we would have to be away to avoid the risk of being arrested for supporting her. Mom looked down at her hands as we took this in.

My mind was churning and I said, “Hold on a minute, have you heard of Dignitas?” When the psychologist said no, I went on to explain there is a place in Switzerland where Mom could go to safely and legally end her life. We could go with her and be right by her side. Mom immediately lifted her head and with a look of delight that we had not seen in many months said, “Switzerland? I could go to Switzerland? I’ve always wanted to go to Switzerland!”

On the way home, Mom was a changed person. No longer was I seeing what she had become - quiet and sullen, with shoulders hunched and a slight scowl. For this moment, I got an opportunity to experience the mom I had always known; she wore a bright smile and was almost giddy, “I had no idea you understood. I can’t believe we could actually do this.” I was reminded of her free spirit and willingness to break norms. She touted, “We could actually go to Switzerland, which I have always wanted to do, and I can end my life at the same time.” With a slight smile, I chuckled and shook my head in awe. A moment to both relish and lament. I had my mom back; however, I knew it would be short lived.

She and I started the process of applying to Dignitas that very afternoon.

Second Blog: Choosing death with dignity in the face of Alzheimer's Disease

My mom chose death with dignity over the slow regression and decline that comes with Alzheimer's Disease. She could not legally choose this option in the U.S. but it was a choice she could make in Switzerland.

"Dignitas – To live with dignity – To die with dignity" (abbreviated hereafter: "Dignitas") is a Swiss non-profit organization founded in 1998 whose objective is to help people live and die with dignity. They describe themselves as "the Swiss self-determination, autonomy and dignity group" providing services and consultation to give people the ability to make decisions regarding their lives right up until the end. Their services combine palliative care, suicide attempt prevention, advance directives, and accompanied suicide. Also, the organization engages in court-case and political work to advance and secure "the last human right" as they put it.

According to their information brochure, in order to qualify for accompanied suicide with Dignitas, a person has to "have a disease which will lead to death (terminal illness), and/or an unendurable incapacitating disability, and/or unbearable and uncontrollable pain." The person has to "be of sound judgement" and has to have enough physical mobility to be able to self-administer the medication needed for dying.

With respect to my mother, it was clear that the first issues to explore with Dignitas were whether suffering the emotional pain of Alzheimer's was sufficient qualification and whether the diagnosis alone would disqualify my mom from being considered to have "sound judgement." Dignitas assured us that having Alzheimer's was not disqualifying relative to being able to make sound decisions. But Dignitas was clear that people with Alzheimer's do eventually lose their cognitive capacity. Consequently, Mom must pay very close attention to the progression of her disease in order to make the final decision while she still could. For non-swiss residents, it typically takes three to four months, sometimes longer, from the time a person makes the initial request for an accompanied suicide to the point when the person ends his or her life. If this is what she wanted to do, she needed to get started.

Once she heard about Dignitas, my mom was ready to start the process right away. She could see her own decline and was afraid she would not be able to state her wishes coherently or act on them if we did not get to Switzerland soon. In June, she took the first step which was to complete and return the "declaration of membership". Dignitas then confirmed her membership and sent her the Dignitas Patient's Instruction / Advance Directive form and an invoice for the one-off joining and yearly subscription fee. Most people become members of Dignitas in order to have another entity oversee their end of life decisions or advance directives. They complete the paperwork that asks questions such as whether the person wants to be on life support, have CPR administered, etc. As mentioned, the choice to end one's life through accompanied suicide is just one of the services offered by Dignitas.

Our next step was to submit a letter officially requesting Dignitas to prepare an accompanied suicide. With this letter, Mom needed to provide medical documentation highlighting her diagnosis and previously tried treatments and she was asked to write a "life report." She needed to include a description of her personal and medical situation, the reasons why she wished to end her life, and information related to her areas of suffering. The life report was meant to include information about her life, work, hobbies, and friends. It specifically asked if family members supported her plan and

whether anyone would be accompanying her to Switzerland. This documentation would be used to determine if she qualifies as an appropriate candidate for accompanied suicide with Dignitas.

Dignitas staff members review this information and follows up with any additional requests needed for a person to qualify. Due to a diagnosis of depression in my mom's paperwork, we had to gather and provide some more information relative to her mental health. This process took some time and set us back a couple of months. Once Dignitas had all the information they needed, we sent them the initial payment of $3,924. This money would pay for Dignitas' and the doctor's consultation/review of the material and the administrative costs to prepare for the accompanied suicide.

By the end of August, my mom received news from Dignitas that she was given a "provisional green light" by the doctor who reviewed her documentation. This meant that based on everything we provided, the doctor determined that she met criteria for the accompanied suicide. She still would need to meet with the doctor in person when in Switzerland, but based on the paperwork, he believed she would qualify. We then had to complete additional documentation needed for the actual accompanied suicide to occur. This documentation included permission forms, records that would be needed by the Swiss authorities after she died, and information about what we wanted to do with her body. Dignitas has learned what will be needed for the process to go smoothly for families. Although it was a lot of information to gather, it was reassuring to us that they clearly knew what they were doing.

Although we were all working to move the process along, it was not lost to us that the faster we worked, the sooner Mom's life would end. For Dad, there were days when Mom was so miserable that the sooner she could stop the emotional suffering, the better. There were other days when life was not so hard. She was a bit more lighthearted and the reality that she would soon be gone weighed heavily on him.

By the middle of September, we had completed all the steps and were able to set the dates for the doctor's consultations and the accompanied suicide. Dignitas was very flexible and worked closely with us to find dates and times that would work. My mom wanted my dad, brothers, and me to travel with her and she wanted us to have a week in Switzerland to be together as a family, celebrate her life, and say good-bye. We contracted for the rental of a house in Zurich which is near the small town of Forch, where Dignitas is located, set the appointments for the doctor's consultations, and completed the final financials with Dignitas - $8,478 included doctor's visits, the actual accompanied suicide, legal paperwork, funeral and registry office expenses. Dignitas had noted in an earlier communication that their statutes make provisions for a reduction or even a complete exemption from all these fees for people who live under modest economic circumstances.

We flew to Switzerland at the end of October and Mom was able to meet with the doctor coworking with Dignitas at our rental house. Understandably, there was concern on her part that she might not be able to convince the doctor she was capable of her decision and that her request would be denied. Much to everyone's relief, the doctor was exceedingly gentle and calm and he began by respectfully asking Mom is she knew why she was in Switzerland. She was able to tell him she wanted to end her life and why. He followed with questions about what dying meant to her and how she came to make her decision. He acknowledged her bravery. A second meeting took place the following day and certified that Mom met the criteria to be able to make the decision to end her life.

The actual day arrived and as we pulled up to a small one level duplex, there were trees lining the side of the driveway, blocking a full view of the house. Two people, a man and a woman, stepped off

the porch and met us at the car. Introducing themselves as B and H and shaking our hands, they led us into a homey and comfortable living area – sofa, chairs, dining table and a care home bed covered by a brightly covered quilt.

After being asked if we'd like coffee, tea, or water, the woman, B, asked Mom if she still wished to end her life. When Mom answered in the affirmative, B took the lead to explain the process. First there were some documents to be signed and any desired clothing or jewelry needed to be relinquished before the procedure began. She then shared that the initial step was for Mom to take an anti-nausea medication followed twenty minutes later by Pentobarbital. We were assured that we could go at our own pace. If we preferred more time, we were welcome to sit in the outside garden or enjoy the walking paths. There was no need to rush.

But having gotten to this point, there did not seem to be any reason for delay. We all agreed we did not need more time. B and H retreated to prepare the medication and when they came out, they encouraged Mom toward the bed. Suddenly I realized that the moment was at hand, that this was our last opportunity to give Mom a hug before she got into a bed she wasn't getting out of again. This was it; we were saying good-bye. "Mom, wait!" My eyes welled up with tears. "Can I have a hug?" My throat was tight. I wiped my eyes. I wanted to hold her so tight but her body felt small and fragile. "I love you Mom."

Mom hugged my brothers and my dad. As Dad reached out to hug and kiss her, a sob escaped him and he held her close. Gently, he helped her into the bed where she was able to sit in an upright position to take the anti-nausea medication. Then B and H quietly left the room indicating they would return after twenty minutes.

As we sat quietly around her bedside, Mom kept up a steady chatter but what was said has been forgotten. In due time, B returned with water and Pentobarbital explaining that it might have a bitter taste and burn a little when swallowing. She handed me a glass of water for Mom to have after drinking the medicine and she suggested that I give Mom a small piece of the nearby chocolate to take away any bitter taste.

We were told that Mom would fairly quickly begin to feel very tired. She would likely yawn, her eyes would close, and she would go into a deep sleep. From there she would slip into a coma, her organs would begin to shut down and death would follow. She would not feel any pain.

When Mom indicated she was ready, I followed B's instructions and watched as Mom drank the medicine, sipped the water, and ate the chocolate. H stood at the foot of the bed and video recorded the process as we sat holding Mom's hands and saying good-bye.

What more to say at that point? I was struck by the silence and commented to Mom that we should have brought some music. On impulse I launched into a Harry Chapin tune, singing "Thirty Thousand Pounds…". As I paused, Mom joined in and together we sang "of bananas". Mom beamed and when she turned to B to speak, her voice was already slurring. She yawned and sighed, she took very deep breaths and her eyes began to close.

As she drifted off, B said "she is sleeping now but she can still hear your voices". Mom's mouth fell open and as her breath grew deeper, it grew raspy and a bit pressured. B explained that while Mom's body was resisting, she was still comfortable. Gradually, her breathing quieted and B shared that

mom was now in a comatose state and would soon stop breathing. Moments later B checked Mom and said, “she has left.”

SUMMARY

My mom died on November 3rd, 2017, five months after she had become a member of Dignitas.

My mom had lived a vibrant and enriching life. She was not happy to end her life early; however, she knew it was the right decision for her. She could see the progressive decline in her functioning and, most importantly, the loss of her independence due to Alzheimer’s Disease.

Prior to finding out about Dignitas, my mom, unknown to us, had already attempted to end her life by ingesting a large number of pills. Had she succeeded, she would have died alone and we would have gone through the experience of finding her dead without having an opportunity to say goodbye.

Instead, my mom, a free spirited, fiercely independent woman, found the option for a legal, safe, and peaceful death with her husband and children by her side to be exactly in line with her wishes. Our experience with Dignitas was exceptional and exactly what we needed.

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