

## TAKEAWAY WISDOM FROM “**SPEAKING OF DYING**” FILM

- *“We never thought we’d live this long.”* **Audrey and Bill Shreve**, like many in our country, are living very long. (now married 71 years!) Their story illustrates the importance of a POLST form, and their desire to get all their children on the same page regarding their wishes.
- *“I just want to live until I die.”* **Susan**, still living with metastasized lung cancer, recently went on her Bingo cruise and visited her grandson. She selected her assertive daughters-in-law as Health Care Agents to support her *“wishes for her last days.”*
- *“Doctors are trained to fix things; to take the heroic role.”* **Dr. Elizabeth Marshall** helps film viewers understand why they cannot depend on physicians to know how to “let go.” Patients need an advocate when they *“don’t want so much treatment”* and desire comfort care only.
- **Dr. Jim DeMaine** states clearly, *“Sometimes in Intensive Care we are just keeping the body alive, rather than allowing for a natural death.”* *“The default in our society is keeping people alive.”* His statements are especially helpful when presenting CPR statistics to patients.
- *“I just didn’t know who to trust.”* **Pat** is living alone in Seattle with a terminal, chronic illness, while her family members live in Memphis, TN. Like many single women, and men, she did not know who to choose as her HC agent. When she made the choice, she breathed a huge sigh of relief. Not *“I can die now, but now I can really live,”* is an inspiring example to others. She also connected her POA with her oldest daughter for mutual support *“when something happens.”*
- *“When I realized I would not be a survivor of the cancer, I chose Hospice Care.”* **Mary Ann** models the value of asking for Hospice early, rather than waiting until one’s last days; her relationship with her hospice “nurse friend” gives her the information and confidence she needs. During seven months on Hospice, Mary Ann crocheted a blanket for a new grandchild, put up her Christmas decorations, and spent quality time with her husband. She died peacefully on Christmas Eve, just a few weeks after the filming.
- *“We know he would not want us to see him suffer like this.”* **Dr. James Owens’** wife and sons knew he would not want his life with Alzheimers prolonged further. They began Palliative and Hospice Care in the hospital, and chose to Discontinue Treatment. The film raises awareness of this option, and the difference between a hospital treatment room and a hospice room.
- *“He died a good death. He didn’t suffer.”* **Alan Albert’s** wife, Phyllis Shacter, helped him carry out his desire to Voluntarily Stop Eating and Drinking (VSED) before he lost his mental competency to Alzheimers. He was able to die quietly at home, rather than in a facility. For the many people who fear Alzheimers or other neurological diseases, just knowing about their choices can bring comfort and reduce fear. See [www.phyllisshacter.com](http://www.phyllisshacter.com) for more on VSED.
- *“Love is the most important thing.”* When **Robert Fuller**, who had MSA (Multiple Systems Atrophy) awoke three weeks after our filming to discover he could no longer use his legs and would have to go to a nursing home, he decided to use his legal Death with Dignity prescription—in one week. During that week both daughters moved home and he accomplished “the real work of dying,” by sharing memories and saying “I love you” and “goodbye” to his family and many friends. Surrounded by harp music, family, and love, he took the medication himself and died quickly and painlessly. *How we die is a legacy we leave to our family and friends. Creating a vision of a peaceful, meaningful ending is the main message of this film.*