

Dianne Cuttillo

## A dying gift — made years in advance

**A**s she lay dying, my mother surprised us by opening her brilliant blue eyes, weakly waving her hand at us, and mouthing the words, "Bye-Bye." After the days she had been unresponsive, it was a deathbed gift we'll always treasure. But the best gift is the one Mom made at least 10 years before her death: her healthcare proxy.

Because Mom completed the Massachusetts Healthcare Proxy form and chose someone to decide for her if she could not, she averted a sibling war among her six children. Because Mom went a step further and thoroughly discussed what she wanted, using Aging with Dignity's Five Wishes document as a guide, we knew how to make her last days comfortable.

We were at peace from the moment we made the decision to take Mom off life support.

It could have turned out very differently.

Mom initially resisted every attempt I made to get her to name a proxy. During one of our more difficult discussions, I grew impatient and spoke harshly.

"Why do you keep pushing this on me?" Mom asked.

"Because you have a death wish," I blurted. "You are seriously ill and not taking care of yourself. If you

end up on life support and a doctor asks what you would have wanted, most of us would say 'remove the machines.' But at least one of us would say, 'She's my mother — you have to save her.' And they'd keep you on life support because they would not want to get sued."

Most of us knew that Mom would not have wanted prolonged life support, because we'd discussed it when cases like Karen Ann Quinlan's made headlines. But one sibling had made clear he did not believe in ever, in his words, "pulling the plug."

I calmed enough to remind my Mom that she could prevent a scene. And she did.

A few weeks after my outburst, Mom told me she had chosen my sister Pam and brother Michael as proxy and alternate. And she did one better. She mailed a copy of her proxy to all six of us. It included a note.

"If Pamela or Michael ever have to make a decision," she wrote, "Don't question it, because they know what I want."

Mom was not unlike many of us; she did not find it easy to talk about death and the difficult situations her illness could cause. A couple of weeks before she died, she said from her hospital bed, "Pamela and Michael might have to talk."

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illnesses, or that she was ready to die. But her simple statement was an affirmation of the decision she somehow knew was coming.

So many people can't bring themselves to do what my courageous mother did and have the conversations. Part of the reason I pushed her so hard was because I'd heard from so many nurses in hospitals I worked in about family members fiercely arguing about what their Mom or Dad would have wanted.

I'd also heard from many hospital caregivers that physicians are not always good at dealing with decisions to discontinue life support. They were right. The surgeon who was my mother's attending physician for her last hospitalization kept telling us he could bring her back to the operating room to try again to clear her massive infection. It would have been a high-risk procedure. If she survived it, she would have faced months of rehabilitation in a nursing home. She'd made it clear

she would not have wanted that.

And so, though Pamela had the legal authority to make the decision, we siblings together convinced the surgeon that the right thing was to remove Mom's ventilator. There was time for us, as well as Mom's brothers and sisters, friends, nieces, and nephews to say goodbye.

There was time, as well, to brush her hair. As children, we loved to brush our mother's long hair and she welcomed it. By her own description, Mom was "not a touchy-feely." Because she expressed her wishes in advance, we knew that Mom would rather have her hair brushed than her hand held in her last days. And that was a gift for which we will always be grateful.

Do you know what your loved ones want? Do you need help finding out? Join the Visiting Nurse Association and Hospice of Northern Berkshire and Williamstown Commons at their two-part series on end-of-life planning. Part 1, Thursday, Oct. 29, covers the reasons why end-of-life planning is important from the points-of-view of a variety of experts in the field. In Part 2, Nov. 12, other professionals will cover the hows of choosing a proxy and putting your wishes in writing. For details, visit [www.nbhealth.org](http://www.nbhealth.org).

Dianne Cuttillo is vice president of external affairs at Northern Berkshire Healthcare and a former Berkshire Eagle reporter and columnist. Her mother, Margaret Donahue Cuttillo, died peacefully in 2004.

GUEST COLUMN

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By Dianne Cutillo

As she lay dying, my mother surprised us by opening her brilliant blue eyes, weakly waving her hand at us and mouthing the words, "Bye-bye." After the days she had been unresponsive, it was a deathbed gift we'll always treasure. But the best gift is the one Mom made at least 10 years before her death: her health care proxy.

Because Mom completed the Massachusetts Healthcare Proxy form and chose someone to decide for her if she could not, she averted a sibling war among her six children. Because Mom went a step further and thoroughly discussed what she wanted, using Aging with Dignity's Five Wishes document as a guide, we knew how to make her last days comfortable.

We were at peace from the moment we made the decision to take Mom off life support.

It could have turned out very differently. Mom initially resisted every attempt I made to get her to name a proxy. During one of our more difficult discussions, I grew impatient and spoke harshly.

"Why do you keep pushing this on me?" Mom asked.

"Because you have a death wish," I blurted. "You are seriously ill and not taking care of yourself. If you end up on life support and a doctor asks what you would have wanted, most of us would say 'remove the machines.' But at least one of us would say, 'She's my mother — you have to save her.' And they'd keep you on life support because they would not want to get sued."

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She did not say she was weary of diagnosis and of battling her many illnesses, or that she was ready to die. But her simple statement was an affirmation of the decision she somehow knew was coming.

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could bring her back to the operating room to try again to clear her massive infection. It would have been a high-risk procedure. If she survived it, she would have faced months of rehabilitation in a nursing home. She'd made it clear she would not have wanted that.

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Part 1, on Thursday, covers the reasons why end-of-life planning is important from the points-of-view of a variety of experts in the field. In Part 2, on Nov. 12, other professionals will cover the hows of choosing a proxy and putting your attorney in writing. For details, read the news brief found below.

## North Adams:

### Two-part discussion on end-of-life planning to be held by VNA

The VNA & Hospice of Northern Berkshire and Williamstown Commons Nursing & Rehabilitation Center will sponsor a two-part discussion on end-of-life planning in October and November. The sessions will include experts on end-of-life care including healthcare workers and clergy.

The first discussion will be held Thursday from 6 to 7:30 p.m. at the VNA & Hospice Community Room, 585 Curran Memorial Highway, Horseshoe. Free will be served at 5:30 p.m.

Leading off the event will be keynote speaker Amber B. Jones, MEd, a consultant to the Center to Advance Palliative Care, hospices, and hospitals. She has extensive experience with end-of-life issues and

is an advocate for patients, their loved ones, and the providers who care for them. Ms. Jones will speak and lead local panelists and experts in end-of-life care, including Robert Janal, MD, an internist and president of Williamstown Medical Associates; Beth Mounay, a social worker at the VNA & Hospice; Billie Allard, RN, vice president of patient care services at North Adams Regional Hospital; Janet McClelland, hospice coordinator at the VNA; Joyce Brewer, administrator of Williamstown Commons; and the Rev. David Anderson.

The second discussion will be held Thursday, Nov. 12, from 5:30 to 7 p.m. at Williamstown Commons, 25 Adams Road in Williamstown, with hors d'oeuvres served at 5 p.m. Williamstown Commons administrator Joyce Brewer will moderate as local panelists and experts in end-of-life planning discuss legal requirements, health care proxies, how to think about end-of-life wishes, and how to engage reluctant family members in the discussion.

Panelists will include attorney James Sisto; Ronald B. Skyp-Dunning, Jr., MD, chief hospitalist at North Adams Regional Hospital; licensed social worker Jane Wilson from Williamstown Commons; and retired physician Erwin Strahner, MD.

Both programs are free and open to the public. Pre-registration is requested; call (413) 458-2111. Continuing education credits are pending.