



I, [REDACTED], [REDACTED] of [REDACTED], affirm:

### Introduction

1. I am a [REDACTED] who together with my late wife, [REDACTED] (known as [REDACTED]), established a [REDACTED] in [REDACTED] at [REDACTED]. [REDACTED] and I were members of [REDACTED] of Exit International, an organisation that advocates for aid in dying from [REDACTED] to [REDACTED]. From [REDACTED] to [REDACTED] I was the [REDACTED].
2. [REDACTED] died in [REDACTED] following a two and a half year battle with [REDACTED].
3. In this affidavit I discuss:
  - (a) [REDACTED] condition;
  - (b) the options that were available to [REDACTED] at the end of her life; and
  - (c) how the option of autonomous death:
    - (i) helped [REDACTED] preserve her dignity and control of her life;
    - (ii) increased her quality of life; and
    - (iii) increased the length of her life.

### [REDACTED] life

4. [REDACTED] was born in [REDACTED], [REDACTED] in [REDACTED] and graduated with a [REDACTED]. She taught [REDACTED] at [REDACTED] until [REDACTED] then decided to travel for a year.
5. We met [REDACTED]. We quickly fell in love and I followed her back to [REDACTED] the following April. Her keen hobby was [REDACTED] so once she had her permanent residency granted we returned to New Zealand in October [REDACTED] and started looking for an opportunity where we could work together.
6. [REDACTED]
7. [REDACTED] was loved by many people. We were involved with lots of community activities – [REDACTED]. Our marriage was pretty much a perfect one. Neither of us wanted children, we had a business, friends and lots of interests. We both loved staying at home and reading – [REDACTED] would read two or three novels, especially science fiction, per week.

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██████ condition

8. ██████ was diagnosed with cancer in ██████. By ██████ she had been operated on and a piece of tumour removed for diagnostics. She had four tumours that were growing on her brain and numerous tumours down her spinal cord. The prognosis was grade 4 cancer (the worst) identified as ██████. ██████ This meant that no one could accurately tell us anything about the disease – the symptoms, or how it would progress. Both radiotherapy and chemotherapy failed to halt the tumour growth.
9. Over time, the cancer spread into ██████ spine and brain, paralysing her. For the final eight months of her life, ██████ was doubly incontinent. She progressively lost the use of her legs, bladder, and bowel and was confined to a wheelchair for the last three months of her life. She relied on me for many of the most personal tasks, including toileting and washing.
10. In the last six months of her life, ██████ was in excruciating pain caused by the tumours pushing on her spine. Nerve pain is the hardest to control and sometimes can't be controlled unless you render a patient virtually unconscious. She was given the option of morphine and had to take it in increasingly larger doses as the tumours grew.
11. ██████ hated doing this because it put her into a stupor. She preferred to tolerate the pain in order to remain lucid, to be able to interact with her loved ones, and be able to participate in her own life. Although ██████ was in excruciating pain, she retained the ability to think rationally, right up until the end of her life.
12. Throughout her illness she was determined to make her own decisions and though often in excruciating pain would never complain. You could read it in her eyes. The one thing she wanted was to decide when she had had enough and not to continue to suffer needlessly.

13. ██████ died on ██████, aged ██████

██████ options following diagnosis

14. ██████ diagnosis of ██████ forced her to think about the options available to her as she approached the end of her life. She did not want to die in insufferable pain or in circumstances beyond her control. She wanted the end of her life to be on her own terms.
15. ██████ started looking into options for ending her life around March ██████. We both understood the position to be that aid in dying was unavailable to ██████, by way of assistance from a doctor, from me, or anyone else. ██████ therefore decided that her only option was to end her own life in order to avoid physical suffering and, most importantly for her, the inevitable loss of independence and control as her disease progressed.
16. ██████ and I discussed the fact that, had she had the option of having a doctor help her to die, that would have been ██████ first choice and the reasons behind that position. She was a vocal supporter of legalising this option, and spoke of it often, ██████.

Had aid been available she would have been able to rely on a doctor to administer an accurate dose, with the knowledge that her death would be quick and painless. She would have felt able to tell others, including family and friends, that this was her choice and to explain her reasons. She would have been able to avoid the cruel and distressing uncertainty about whether alternative options to end her life would be able to be procured and would work.

17. We discussed travelling to Dignitas in Switzerland, or to Belgium, where medical aid in dying is legally available, but travelling became impossible due to her illness and particularly her incontinence. Moreover, [REDACTED] wished to die in New Zealand at her home. She expressed the wish to die surrounded by her friends and family, but the potential legal implications meant that she could not share her intentions with them.
18. Around [REDACTED] [REDACTED] [REDACTED] discovered that it was possible to order Nembutal - a drug used by veterinarians to put down animals - from Mexico and have it delivered to New Zealand. She placed an order via email and Western Union money transfer for a bottle (from recollection in excess of US\$500) which failed to materialise. [REDACTED] then placed a second order, and the package was eventually delivered to her. The price she paid was an exorbitant mark up on the cost of the drug (I understand it sells for US\$10 a bottle to vets). She hid it away and left it there. Once [REDACTED] had received the Nembutal, she was greatly relieved. She told me that she felt much calmer and able to face the physical symptoms of her illness. In addition, and very importantly, her anxiety and fear of losing control were significantly reduced.
19. For example, prior to having the Nembutal, [REDACTED] was very focused on how she would die. She was very frightened of the possibility, knowing that her death would be excruciatingly painful. However, once [REDACTED] had the Nembutal in her possession, she no longer wanted to talk about dying. She stopped focusing on dying and began to focus on living again.
20. The decision to buy Nembutal was a carefully considered and rational choice for [REDACTED]: instead of being at the mercy of whatever the disease presented, she was comforted by the fact that it put her in a position to decide at what point her life ceased to be worth living.
21. On [REDACTED], [REDACTED] decided it was time to drink the Nembutal. She did so, and she died peacefully that night.

#### **Autonomous death preserves control and dignity**

22. I have no doubt that knowing she had in her possession the means to end her life painlessly at a time of her choosing increased [REDACTED] quality of life. It helped her maintain dignity during the final period before her death, knowing she could choose a death in accordance with her values, and did not need to fear the escalating unmanageable pain and suffering.
23. Having access to Nembutal meant that [REDACTED] was in control of her own destiny; she could choose when to make her exit, knowing that she would not have to suffer through intolerable pain. For her, the lack of autonomy - through which many other patients suffer - was the biggest concern. She didn't want anyone else to decide how her life was to end.

### Autonomous death meant a longer life

24. [REDACTED] told me that had she not had access to Nembutal, she would have taken her life at an earlier stage while physically able to avail herself of other options. This was to protect me from possible prosecution as I didn't want to leave her to die alone.
25. Her second choice of means involved inhaling nitrogen dispensed into a plastic bag placed over her head. This requires sufficient strength to lift a nitrogen gas tank - something she lost one year before she died. [REDACTED] expressed relief that she was not forced to take her life earlier in order to use this means. My helping was out of the question. [REDACTED] did not want me to risk criminal liability for her death.
26. It is my firm belief that without the option of Nembutal, it is highly likely [REDACTED] would have taken her life when she had the strength to do so, a whole year before her actual death.

### My experience

27. I am grateful that [REDACTED] was able to access the means to take her own life at a time of her choosing, when her physical suffering became intolerable. We were fortunate that [REDACTED] had the education, drive and means to exercise this option. However, I believe she suffered unnecessarily as a result of the unavailability of physician aid in dying.
28. I witnessed the anxiety and emotional distress she suffered as a result of being forced to consider the options available to her without professional input: to take her life while she was physically able or resign herself to suffering intolerably for an indeterminate period of time. She was forced to expend huge energy and time at an advanced stage of her illness to research and obtain the means to take her own life. I am sad that she had to act alone, in secret, and was unable to share her plans with her loved ones, or to say goodbye to them.
29. While I never wanted [REDACTED] to die I'm glad she didn't suffer any more than she did. I talked her out of drinking Nembutal a couple of times before she finally told me she couldn't bear the pain anymore and hated seeing me in distress. She was an incredibly brave, intelligent and beautiful woman and her being able to make that decision to ease both our burdens is for me the ultimate act of love. But I wish she had been able to do so with a doctor's assistance and professional advice. It would have given me and her a lot of assurance about how and when she could bring about her death.

AFFIRMED at [REDACTED] this 22<sup>nd</sup> day of April  
2015 before me:



A solicitor of the High Court of New Zealand

[REDACTED]