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LETTERS TO THE EDITOR

A patient gives his perspective on physician-assisted death

I am a physician and for the last eight years have been a poster boy for the disease that most people refer to when they are thinking of the merits of physician-assisted suicide.

I was an active 41-year-old when diagnosed with ALS. Now eight years later, I currently can't move my arms and only extend my legs minimally. I can't walk, eat, drink or speak. I can think, write, talk and explore the world through the movement of my eyes and an alternative augmentative communication device.

In August of last year I had a chance to choose death over life as I made a decision to undergo tracheotomy and make use of a ventilator full time. I have chosen to live within the terribly restrictive confines of my disease.

I am really lucky to be able to live with ALS. I have a loving and supportive wife to make this journey with. I have the financial resources to be able to support my family. I live debt-free and my financial resources enable my living not to be a drain on my family. I have friends who treat me like I am disease-free and my social sphere is as large as I choose it to be. I am free of mental disease that people associate with my level of disability. I am not suffering, physically or mentally.

It is a luxury to have the circumstances in my life in which I can choose to live. Not a lot of people have the same circumstances. They are faced with a degenerative disease or terminal diagnosis in which they don't want to see their family have to endure the hardships associated with dying. Although

I choose life I appreciate others' ability to make their own decision regarding life or death.

I applaud the Supreme Court of Canada in their decision the strike down the ban of physician-assisted suicide. Now it is time for physicians to assist in providing leadership to develop protocols that enable physician-assisted suicide to become a reality in Canada. The need to protect the physician who is morally against this has to be acknowledged and legitimized. The protection of those not mentally capable has to be part of any protocols developed.

I do not see this decision as delegitimizing my choice to live.

I have been with families through births and deaths. I like to think my involvement in palliative care has helped ease the suffering of my patients. I don't know if I were still practising medicine if I would be able to participate in a physician-assisted death. Although when I was active and healthy I wouldn't have thought I could live within the confines in which I currently do. I think positions change with experiences.

The Hippocratic Oath that physicians recite upon graduation tells us to do no harm to our patients. I think sometimes that inaction in a patient who is suffering with a terminal illness is to do harm.

Should my circumstances change I find comfort in the fact that I can now choose a gentle and humane death surrounded by loved ones on my own terms.

*Dr. Jeffrey Sutherland,
MD, CCFP, FCFP*

Grandson upset by lack of respect for vehicle funeral procession

Where is the respect?

When did the time come that drivers failed to pull over for a funeral procession. On June 27, at about 3:30 p.m. a funeral procession for my 94-year-old grandmother was traveling south on Trafalgar Rd., making the turn east onto Maple Ave. (on a green light). My aunt— daughter of the deceased— was T-boned by a young man that had more important places to be then to pull over, as the car in front of him did. So he pulled around the car in front of him that had the common sense to yield to the procession— hitting my aunt's car full on on the passenger side. injuring my uncle and writing off their vehicle. Needless to say they did not get a chance to say their final good-bye to our Nan, along with another aunt of mine— the oldest

daughter and some grandkids that stayed to give statements to the police.

So in closing if you or your parents read this article, I hope you are real proud of yourself and your son for having zero respect for the dead.

Brian Leslie (grandson)

Letters policy

Letters must include the author's name, address and daytime phone number. Anonymous letters will not be published. Letters should not exceed 150 words and may be edited for content and/or length. Publication is not guaranteed.



Email: cvernon@metroland.com
Mail or drop off: Independent & Free Press,
280 Guelph St., Unit 77, Georgetown, ON, L7G 4B1.