Making your Wishes Known.

As we age, it is important to think about the kind of care we would or would not want at the end of our life. While this is always important, it becomes even more so during a pandemic. People responding to you, be it your primary care provider, a family member or friend, a paramedic, an emergency room or intensive care unit physician all want to know—what kind of care do you want?

We know that COVID-19 can cause life-threatening illness relatively quickly, and that while most people have mild to moderate (not requiring hospitalization) symptoms, many are sick enough to be hospitalized and, possibly need to have the extra support (like a breathing machine or ventilator) in the ICU. Particularly those with health conditions like diabetes or hypertension who are over age 65. As age increases, risk goes up. Many people who are severely ill on a ventilator require prolonged hospitalization under heavy sedation, and if they are able to come off of the ventilator may have a long process of rehabilitation ahead of them. Many people who end up on a ventilator are unable to come off of it, and thus die.

Much has been reported in the news about this very challenging situation, and it is the default mode of our medical system to do everything we can to support someone to survive. However, that is not always what someone would choose, if offered the choice.

We don't know if COVID-19 will make its way through West Marin as it has other communities. Now is a wonderful time to have these conversations with loved ones and primary care providers: how much care would you want? In what setting? This is a deeply personal consideration, and there is no "right" answer. For many people, myself included, it makes sense to opt in to the full extent of life supportive treatment. For many, particularly if it is unlikely that this care would be unsuccessful, however you define it, it may make more sense to opt for care in the hospital but stop short of being put into a medically-induced coma on a ventilator. For some, it makes most sense to focus on comfort care, or "palliation" of symptoms like feeling short of breath, at home, and to ensure that this is made possible with the support of medicines that alleviate suffering.

How do you make these wishes known? Start with a conversation. Then fill out an Advance Medical Directive. You can obtain one from your primary care provider, or online here (available in English and Spanish): <u>https://prepareforyourcare.org/advance-directive-state/ca</u>. You can specify on the form if your wishes pertain only to illness due to COVID-19. I will be facilitating conversations about this and answering questions for community members on a weekly Zoom call Wednesday evenings from 6:30 to 7:30 (RSVP to Sophie at <u>sophie@naturainstitute.org</u> for call details). We will also talk about another form you may have heard about, the "POLST" form. Now is a great time to make your wishes known.