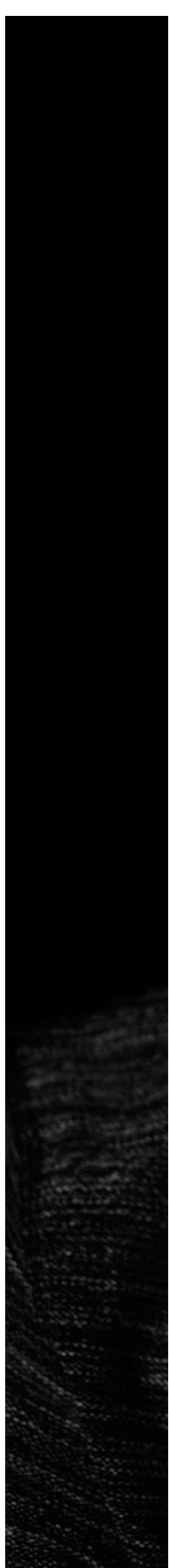


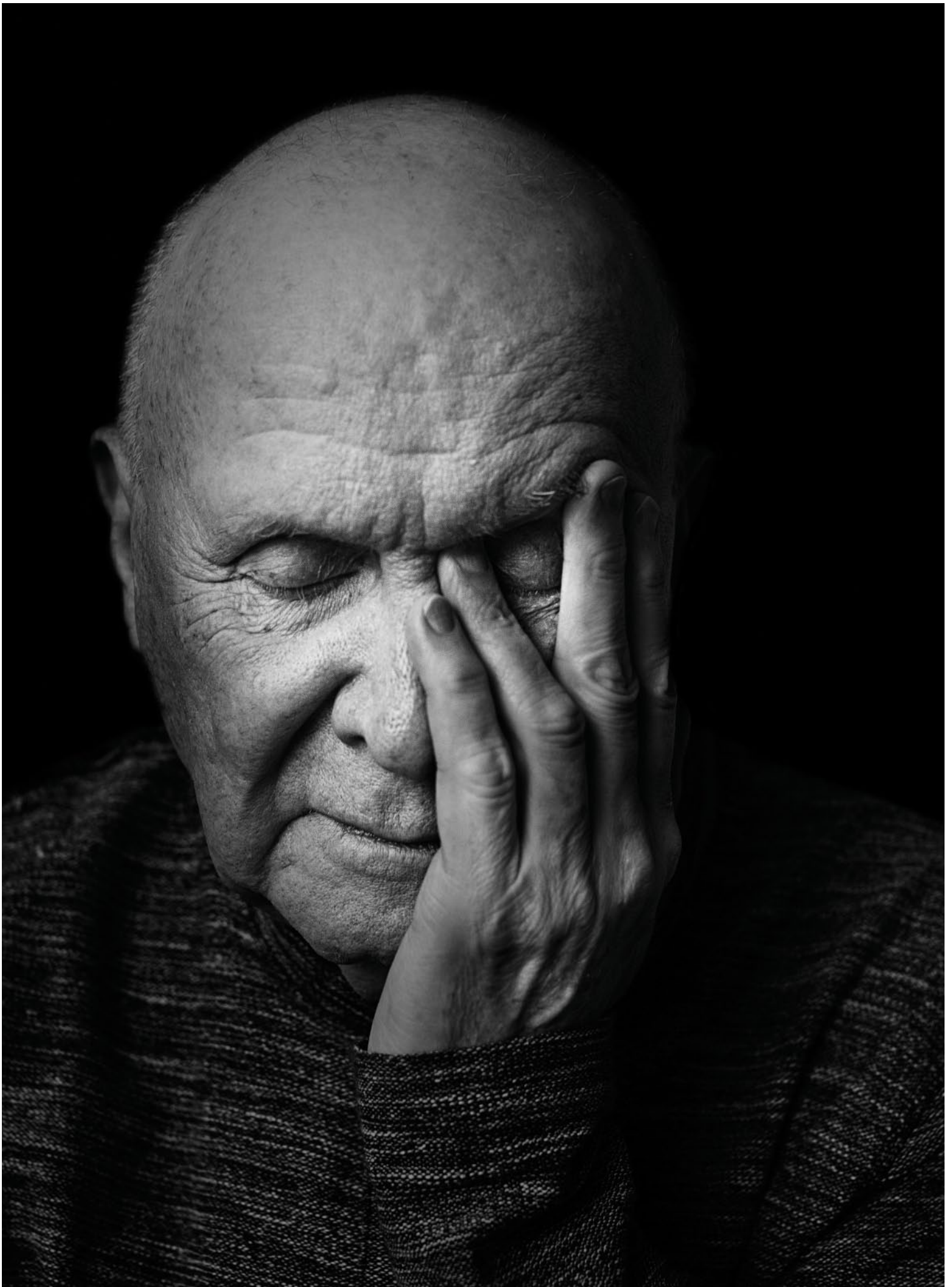
*Between 1999 and 2001,  
I helped eight people die—  
including the poet Al Purdy.  
Now, as I prepare to  
take my own life,  
I'm ready to tell my story*

**By the  
time you  
read this,  
I'll be  
dead**

BY JOHN HOFSESS

PHOTOGRAPH BY TROY MOTH







met the Québécois filmmaker Claude Jutra in 1963, when he visited McMaster University for a showing of his first feature, *À tout prendre*. Years later, when I was the film critic at *Maclean's* magazine, I visited Jutra on several occasions in Montreal, and he invited me to preview his film *Mon oncle Antoine* prior to its release. In 1982, he read an idealistic article I'd written about assisted dying. He had been diagnosed with early-onset Alzheimer's and wanted help to end his life, but I put him off. I couldn't bring myself to convert my words into actions.

Jutra's condition deteriorated until at last he had to act alone. On November 5, 1986, he leapt from the Jacques Cartier Bridge in Montreal. Punishing winter weather surrounded him: fog, icy rain and snow. The desperation of his suicide altered me in ways I did not fully realize at the time.

Five years after his death, I established the Right to Die Society of Canada. I was a reluctant activist, and initially, I invested my energy in law reform. In 1992, the Society initiated a challenge under the Charter of Rights and Freedoms on behalf of Sue Rodriguez, the Victoria woman who had been diagnosed with ALS at age 41. We attempted to strike down Section 241(b) of the Criminal Code, which made assisted suicide a criminal offence. The Supreme Court of Canada rejected the challenge in a 5-4 ruling. It would be many years before it would accept a comparable challenge—I foresaw a painful future for thousands of Canadians.

I was horrified anew in 1999 when the gifted conductor Georg Tintner, who was dying from a rare form of melanoma, jumped from the balcony of his 11th-floor apartment in Halifax to end his agony. Many Canadians would hear such news, shake their heads, utter a few sympathetic platitudes and move on. But I couldn't just sit back and wring my hands. That year, I went from advocating for assisted suicides to facilitating them. Let's not mince words: I killed people who wanted to die.

Nothing in my background prepared me for what needed to be done. I'd heard numerous horror stories about people who relied upon advice from do-it-yourself suicide books, such as Derek Humphry's *Final Exit: The Practicalities of Self-Deliverance and Assisted Suicide for the Dying*. He prescribed a plastic bag over the head to hasten death. That technique often created so much discomfort that many people failed.

I created an underground assisted death service that offered innovative non-medical methods of dying to Society members. My partner was Evelyn Martens, a retired office worker who'd watched her brother die in agony from bone cancer (she died

in 2011). Following Jack Kevorkian's example, we didn't require clients to pay for our services. We operated on the Robin Hood principle: members who could afford to cover the costs of our illegal operations helped compensate for those who couldn't.

All of this took place in secret. Between 1999 and 2001, we provided eight members of the Society with assisted deaths. The celebrated Canadian poet Al Purdy was one of them, and he authorized me to publish this posthumous account. The question of when, he left to my discretion. "You write it. You arranged everything. Wouldn't be possible without you," he said in his famous gravelly voice. "I don't mind a bit being labelled a suicide."

**W**hen Al Purdy joined the Right to Die Society in 1997, I had long been familiar with his work and his place in the CanLit firmament. Back in the early 1970s, when I was at *Maclean's*, Purdy had written a series for the magazine exploring West Coast life. Our professional paths crossed again later, when we both wrote for *Weekend* and *The Canadian* magazines. Al received the Right to Die Society's news bulletins and our quarterly magazine, *Last Rights*. In early 1999, he wrote to me requesting a private visit. At age 81, he was gravely ill with metastasized lung cancer, among other ailments: severe arthritis, peripheral neuropathy and atrial fibrillation, plus what he called "that Biblical prophet age." He was worried about how his life might end.

Al and his wife, Eurithe, had taken to spending half the year on Vancouver Island and the other half at the A-frame house they'd built in Ameliasburgh, in Prince Edward County. When we met at his winter home near Sidney, B.C., he was emaciated and pale, but he still had a sharp mind and keen sensitivity. He had shone brightly as a creative force for decades; now, with his energy in steep decline and pain intensifying, it was sunset time.

Al told me he wanted to die, the sooner the better. Eurithe did not fully share his views; it was only when she left the room that he spoke candidly. "She wants to explore all avenues of survival," he told me. "But nothing is going to save me. I'm fed up with dying slowly." I mentioned that another poet, P.K. Page, was also a supportive member of the Society. Al responded: "Knowing Pat, I'm not surprised."

We discussed the novelist Margaret Laurence, one of Al's close friends. At her death, in 1987, the media reported that she had died of lung cancer. Ten years later, James King, in his biography *The Life of Margaret Laurence*, revealed that she had actually taken her own life using information provided by the Hemlock Society, a right-to-die organization in the United States. In an interview, King said that some of Laurence's friends were opposed to the revelation of the true cause of her death. Apparently they regarded suicide as a sign of shameful weakness.



9310 Lochside Dr.,  
Sidney, BC V8L 1N6  
Apr. 21, '99

John Hofsess,  
Evelyn Martens

Dear Both-of-you,

Thanks most warmly for your support in my illness. Follows a brief synopsis of it. In late Feb. I had a prostate surgery. This brought on atrial fibrillosis, with coneguent drugs to control it. X-Rays at Saanichton Hospital showed a shadow on my lungs. A procedute at Vic. Gen. Hos. showed a squamous carcinoma on the left lung, later confirmed by C.T. Scan.

Dr. Sparling and Dr. Griswold tell me this can be--probably--removed leaving me with 80% lung capacity. However, I believe the massive invasion of my body required for its removal would very probably kill me (I am now 80 yrs. old). So that's where I stand right now.

We are busy transferring to my wife's name what it is feasible to transfer. She--her name is Eurithe--refuses to admit that nothing is possible but surgery. She is exploring other avenues, including Dr. Lam in Vancouver and possibly Dr. Hoffer in Victoria. However, various other old age conditions make it unlikely that my "quality of life" would be very elevated.

And that's where I stand at this moment. And I hesitate to propose my death very strongly in the face of my wife's resistance. I'm sure you can see what I mean, and my feeling in the matter.

Sincerely,

Al Purdy

#### LIFE AND DEATH

*A 1999 letter from the poet Al Purdy to the author, in which he expresses his wish to die; Purdy with Eurithe, his wife of nearly 60 years, at their house in Ameliasburgh, Ontario; Purdy in 1978 at age 60*



PHOTOGRAPHS: LETTER BY TROY NOTH; PURDY'S COURTESY OF JOHN HOFSESS; AL PURDY BY DAVID BOSWELL

In mid-1999, as Al's health failed and his energy waned, his notes to friends became shorter and more poignant, suffused with the recognition of his numbered days. To his friend Margaret Atwood, he wrote: "I go into hospital June 21, surgery next day. I hope and expect to come out of it, but you never know. Unknown country. I've had a lot of respect for you over a long period of time.... So if I don't come out of this surgery session as 'expected,' your own eventual arrival will be attended with drums and flutes, welcoming signs. Love, Al."

The next time I saw him, in early 2000, he was in much worse shape. "I hesitate to propose my death very strongly in the face of my wife's resistance," he had written in a letter. "Every day is agonizing. I'm fed up with suffering," he told me later. In the intervening year, as a concession to Eurithe, he had tried vitamin therapy and other dietary treatments in which he had no faith. After all his efforts failed, he made a firm decision to end his life. Eurithe seemed willing to comply.

By the time Al approached me, I had spent years researching how to end a person's life in a quick, painless and spiritually pleasing way. I worked with engineers, physicians and right-to-die activists like Derek Humphry to develop these methods—we called our organization NuTech. Along with the

late Gordon Smith, head of a diving equipment manufacturing company in Port Moody, I had developed a helium method, which involved placing an "exit bag" over a person's head, pulling a drawstring and inflating the bag with the inert gas. When Al asked about the method I'd use, I suggested he might begin by drinking a glass of his favourite wine laced with Rohypnol, a potent benzodiazapine that's about 10 times stronger than Valium. It's tasteless, colourless and quick acting. In addition to its sleep-inducing hypnotic effects, Rohypnol quickly reduces feelings of anxiety. It's the perfect medication for an assisted death.

In Europe, Rohypnol is a widely prescribed sedative. In the United States and Canada, it has been branded a date-rape drug. It is banned in the U.S., and in Canada, a person may possess a small amount obtained outside the country with a foreign doctor's prescription. I had in my possession a large supply of Rohypnol obtained through a fellow right-to-die activist in France. Since I was already violating the law by assisting suicide, possessing illegal drugs to ensure a more pleasant death seemed to add little additional risk.

With Rohypnol in his system, Al would pass out in minutes and have no further awareness. I recommended he do this in private with Eurithe; he would thus be anesthetized during

the brief clinical procedure of assisted death. I viewed my actions not as defying Canadian law but rather as placing ourselves into the future—setting an example of how it was possible to die in a voluntary, compassionate way. My allegiance was to Al Purdy and his wishes, not to the preservation of out-moded laws or the hypocrisies of Canadian politicians.

The maximum penalty for assisted suicide was 14 years in prison. I was raising the stakes: by giving Al a pre-death sedative, my actions could be construed not as assisted suicide but as premeditated, first-degree murder, with a mandatory life sentence. Looking into his eyes, respecting his intellect, hearing his wishes repeated over time, knowing him to be an independent person and thinker, I needed no further assurance that he, in a rational state, had authorized me to be his agent and partner in ending his life. All he would have to do was sip his wine and say farewell to the love of his life, while his favourite music played quietly in the background. I felt honoured that he delegated the technical details to me.

I told Al that Gordon Smith and I had developed another method, called a “debreather.” Gordon manufactured rebreathers, which process the exhaled breath of a diver, remove the carbon dioxide and return to the diver a purified air supply (with additional oxygen). I asked him if a modified version could be made, capable of causing death without discomfort. A debreather, as I envisioned it, would absorb carbon dioxide but not add more oxygen; a person would inhale a rising level of the inert gas nitrogen and declining levels of oxygen. As long as one can continue to breathe, there is no discomfort. The oxygen declines; the person passes out. A debreather provides a comfortable death within 30 minutes.

Gordon had created prototypes that didn’t work properly—one overheated the air as it scrubbed carbon dioxide—but, I told Al, we finally had a working model: compact, lightweight, comfortable and lethal. The debreather had been deployed several times in assisted suicides in 1999 in the U.S. and worked precisely as Gordon had predicted. I showed Al the latest model. Each unit cost \$250 for parts; Gordon did not charge for his labour. I also offered to show Al a short video of another Right to Die member trying out the debreather and saying that he found it comfortable.

“This is all good news to me,” Al said. “But why do you do it?” At first, I wasn’t sure what to say. There’s a great deal of suffering in the world about which I could do nothing, but there’s one critical area, at the end of life, where I could help.

I told him about Georg Tintner’s death and how it had affected me profoundly. If only he had known how to find me. I’m not assuming he’d have wanted an assisted death, but at least he’d have had a choice, I told Al. I had bought all of Tintner’s Bruckner recordings and listened repeatedly to each symphony in a room with just a few candles. Al smiled. I knew that he, a declared atheist, had his own intense experiences when he listened to his collection of spirituals by Paul Robeson and Mahalia Jackson. “People like Georg became a permanent part of my consciousness,” I said. “They helped define my purpose. As do you.”

Al looked thoughtful. Finally, he said: “I’m very interested. You’re the only one who talks to me like this.” He told me he had made up his mind: he would entrust me with his death. A choice between methods was his last decision: he chose Rohypnol and helium. Sedation appealed to him.



#### THE CANADIAN KEVORKIAN

*The author pictured in 1992 at Ross Bay Cemetery in Victoria; a debreather, a modified piece of scuba technology that the author used to help his clients die peacefully and painlessly*



**I**n the last weeks of his life, perhaps comforted to know that a worrisome issue had been resolved, Al seemed more relaxed. He wasn’t passively making peace with death. Far from it—he was denying death its sting, rejecting its indifference to him. Being mortal did not mean he had to accept prolonged suffering, or have his life micromanaged by the medical profession or the government.

We agreed on the date: Thursday, April 20, 2000. A few days beforehand, we discussed the pros and cons of revealing the details of his death. There were three options. First, we could make it appear that he’d had a natural death—that he’d passed away in his sleep. I thought there was a 99 per cent chance a coroner would buy it, due to Al’s age and advanced illness.

Second, he could appear to have committed suicide on his own. I described how a woman we’d helped who was dying from ovarian cancer had followed such a scenario. Although she was suffering greatly, it was implausible that she would die in her sleep. She was considerably younger than Al, and her heart was sound. I suggested we create the impression that she died alone by her own hand.

She ingested a modest amount of a slow-acting barbiturate she had obtained in Mexico. I then gave her Rohypnol, which put her quickly to sleep. Once she passed out, helium was administered, quickly causing her death. Gordon provided a small high-pressure helium tank. Evelyn, Gordon and I all



# In his last weeks, Al seemed more relaxed. He wasn't passively making peace with death. Far from it. He was denying death its sting, rejecting its indifference to him

wore plastic gloves and paper booties over our shoes. We made sure there was no trace of our visit. We had parked discreetly in a garage under the house.

Her husband wanted to be with her throughout, but we advised him to go out before we began and obtain timed receipts from various sources (ATM, supermarket). When the husband returned, we left, and he called 911. He was later questioned by the RCMP; officers were satisfied when he produced receipts showing he had not been present during the time his wife supposedly took her life. No further questions were asked.

I wanted to create the impression that she intended to take her own life. She wrote a suicide note that we placed on the bed beside a copy of *Final Exit* and an emptied box of Mexican pills. A regular non-helium exit bag was left around her head. These items were props. If an autopsy were performed, the small amount of barbiturate in her stomach should be sufficient to convince a coroner that she had followed the classic formula of *Final Exit*. I wanted to conceal the true cause of death so that the helium method would remain unknown and no suspicion of assisted suicide would arise. I successfully followed this scenario on two subsequent occasions.

I told Al he might consider a third option—one that was deliberately provocative. Immediately after his death, I could tell the authorities exactly what had transpired. This might well lead to criminal prosecution; I was willing to stand trial for his death if such a trial might lead to law reform. The downside of full disclosure, besides possible incarceration, would be that I would be unable to help anyone else—and I believed there would

be many Canadians in the years ahead who would want my help. I knew of no one else in Canada who offered active end-of-life assistance to those who desired to die on their own terms. This third option would end what I considered an essential service, provoke an investigation into Al's death and cause Eurithe distress on top of her grief.

We discussed each option. Eurithe preferred giving the impression that Al had died in his sleep. She was not in favour of any plan that involved controversy, police or a media frenzy.

The final decision was Al's. He deferred to Eurithe's sensitivities, and we agreed that we would stage his dying as a natural event at his home on Vancouver Island.

**O**n the evening of April 20, 2000, Al Purdy drank a glass of Chilean wine laced with Rohypnol. Murphy's Law offered one last demonstration of its quirky power: the wine was corked. He sipped it anyway, in the company of his love of almost 60 years. There was no rush, no timetable. The last piece of music he heard was Paul Robeson's best rendition of "Ol' Man River"—his favourite singer performing one of his favourite songs.

During that final communion, Al passed out. Soon after, Eurithe left his bedside, walked down the hall and entered the living room. Evelyn and I went into the bedroom. I gently pinched Al's skin at various places; there was no response. The only sound was his slowed breathing. I waited for his unconsciousness to deepen.

We worked as a team, silently, efficiently. We had brought two helium tanks in bulky boxes labelled "party balloon kits." Evelyn placed them beside Al's bed. She attached plastic tubing to a Y-connection joined to both tanks, so the contents would feed simultaneously into a plastic bag. Our exit bag was 56 centimetres by 91 centimetres, with elastic sewn into a flannelette collar; a Velcro strip was used to seal the bag snugly around the neck.

Evelyn placed the exit bag around Al's forehead, and I inflated it with helium. I waited a few minutes longer, still pinching his skin to make sure he was deeply sedated. The inflated bag rose above his head like a chef's hat. It had to be fully inflated before being pulled down to minimize available oxygen. Evelyn pulled the bag down over his head and sealed the collar. I increased the helium flow.

The body shows no adverse reaction to pure helium. It responds as if the person is breathing normal air, except that the lack of oxygen causes the brain to black out within seconds. Al took a deep breath, and his body went limp. After two or three minutes, he seemed to draw a final breath, but this may have been purely reflexive. I allowed both tanks to empty into the exit bag. Then we removed the tanks and put them back in Evelyn's van for disposal. We had chosen a secluded dumpster in advance, one with no surveillance cameras.

On the way out, around 11 p.m., I stopped to speak with Eurithe, who was dwelling deeply in her own thoughts and feelings. (A family member was present to comfort her.) I nodded and said, "It went well." I did not need to remind her that, in the morning, she was to call 911, as if she had just woken to discover her husband's lifeless body. No questions were raised. The media reported that Al Purdy died in his sleep from lung cancer.

# Evelyn placed the exit bag around Al's forehead, and I inflated it with helium. It rose above his head like a chef's hat

His assisted death was the fifth of eight that Evelyn and I provided. The poet Susan Musgrave, who knew Al well, wrote of his final months: "Al looked at death the same way he has always looked at life—right between the eyes." That was my impression as well.

**E**urithe, Al and I agreed to conceal the true cause of Al's death for an unspecified time; there was no intention to create a permanent falsehood. I favoured concealment for one reason only: I wanted to see our assisted death service continue for as many years as possible. Had my life's work remained in my control, I would have continued to help people die. However, in 2002, Evelyn Martens was charged with two counts of assisted suicide involving women about whom I knew nothing. As a result of having our office located in Evelyn's home, all of our initiatives collapsed. All records, including membership and mailing lists, correspondence, and all supplies—even postage stamps—were seized and never returned to me (I could hardly inquire about them without raising suspicion). A bequest of nearly \$50,000 from a Right to Die member in Nova Scotia disappeared without any accounting. The service that provided great comfort to Al Purdy, a man sometimes called the Voice of the Land, was no longer available to the rest of the land.

It was two years before Evelyn's trial began. In November 2004, she was acquitted for lack of evidence. But the authorities' awareness made it impossible to revive our assisted death service. Since then, many Canadians have suffered greatly, trying to have a meaningful choice in dying. They include such prominent names as Donald Low, the Mount Sinai microbiologist who died from a brain tumour in 2013; Gloria Taylor, the ALS patient from B.C. who petitioned the government for her right to die; and Kathleen Carter, a woman suffering from degenerative spinal stenosis, whose federal challenge finally convinced the Supreme Court to lift the ban on assisted death.

Each left a message on the wall of human suffering. Each sought an assisted death. Some received publicity, but Canada denied them the help that we were able to provide Al Purdy.

**L**ast year, while preparing this account of Al's death, I consulted two lawyers. They told me there's no statute of limitations in our Criminal Code. Nor is there recognition of "euthanasia" or "mercy killing." I was told that, upon publication of this article, I could be arrested and charged with crimes ranging from assisted suicide to first-degree murder. If bail was prohibitively high, I could languish in jail indefinitely. Under current Canadian law, there's no apparent difference between me and killers such as Robert Pickton and Paul Bernardo.

In February 2015, the Supreme Court of Canada ruled unanimously that a general prohibition of physician-assisted suicide was unconstitutional. It violated the rights of "competent adults who are suffering intolerably as a result of a grievous and irremediable medical condition." Within a few months, there will be systems in place to help people achieve a good death in Canada. I will not be here to see it. At age 78, I have been diagnosed with two terminal illnesses (pulmonary fibrosis and prostate cancer) and an unstable heart. As I complete this article in February 2016, I have learned that, for the third time in six years, the electrical system of my heart has become unstable, and I may need a third ablation procedure. My quality of life has disintegrated.

On February 23, I will fly to Switzerland to die. The latitude of Swiss law appeals to me—laypersons are permitted to assist voluntary deaths—and I wish to end my life in the company of good people. By the time this story is published, I will be dead. Every day that I am able to write, I work on completing a book, *The Future of Death: True Stories About Assisted Dying*, to be published as an e-book by Canadian Humanist Publications after my death. It's the last best thing I can do to give Canadians a deeper understanding of right-to-die events during the last 25 years.

I belong to Eternal Spirit, an organization near Basel, Switzerland, that provides voluntary assisted death services to foreigners. They've vetted me on medical grounds for a legally assisted death. I've chosen Eternal Spirit because its founder, Dr. Erika Preisig, developed an innovative IV infusion technique for the barbiturate Natrium-Pentobarbital, which causes a peaceful passing within a few minutes. I have an iPad app that counts down the time I have left. Dr. Michael Irwin, a respected figure in the right-to-die movement in England and a former medical director at the United Nations, has offered to be with me and to pay half of Eternal Spirit's costs, which total around \$10,000. A trust in Switzerland related to Eternal Spirit will pay the remaining half. I bought a \$1,200 round trip fare to Basel—a return ticket looks better as one passes through the scrutiny of officialdom.

Someday, doctors will offer assisted death services much more sophisticated than anything I created. Providing others with humane deaths at a time of their choosing will be seen as an important public service. I imagine a time when the progressive features of Al Purdy's death will become end-of-life options for all Canadians. My actions will be considered unremarkable. ■

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*Editor's note: on February 29, 2016, John Hofsess died, as planned, in Basel, Switzerland.*