My name is R Flynn and I live in Edinburgh. I was diagnosed with Alzheimer's disease in January 2023 when I was 67 years old. My employer noticed changes in the way I was presenting at work and supported me to explore this further. Their support was vital in helping me to receive my diagnosis.

Since my diagnosis, I have done everything I can to live well with my condition. I continue to work with the ongoing support of my employer and I have become an active member of the dementia community, participating in local groups and events, campaigning and awareness-raising as a member of the Scottish Dementia Working Group (SDWG) and becoming very involved in research opportunities. I also enjoy spending time with family and friends, retaining and building those relationships that are so important to me.

I have benefitted from receiving an early diagnosis of dementia. This has enabled me to access the support I need to live on my own. It has also allowed me to plan ahead for the future and to think about what is important to me. I have been able to consider how I want to live my life but it has also allowed me to reflect on the changes that will certainly come around for me. I know that my condition will deteriorate over time and there is no cure or treatment that can prevent the inevitable outcomes of dementia. Although my diagnosis of dementia means that death is in sight for me, I still have capacity so it's important to me that I can make plans and prepare for the future. I know that situation isn't going to last and it's not something I can control. All I can do at this stage is make my preferences known and, for me, that would be to have the option of assisted suicide. It's essential for me that I look ahead since my capacity is likely to change so I want to set down a clear marker about my wishes to avoid any future dilemmas around this decision.

I believe in choice at a personal level, as long as it doesn't cause harm to others. For me, assisted dying is a choice that I might well choose, if it becomes available. I see it as a personal choice that is both selfish and unselfish. For me, it's a selfish choice because I want to avoid trauma and distress for myself. I want to avoid suffering, which in my opinion is more than just physical pain; it's also mental anguish and the loss of ability to act on my own behalf or to be able to express my own will – things that are likely to happen for me as my dementia progresses. But it's also an unselfish choice because I want to protect my loved ones, to the best of my ability, from the burden of supporting my decline. They would potentially suffer both emotionally and financially and I want to avoid that for them, if I can. I ultimately want the decision to be mine, with their support and acceptance, and for my rights to be placed at the heart of any future decisions and actions.

I have taken the time to consider and really understand the decisions that I would like to make with regard to how I want to experience the end of my life. I believe that the choice to engage in an assisted death can be pragmatic and rational, not merely an emotional undertaking. I understand that people find it difficult to talk about death because people don't want to talk about things that are emotionally challenging or hurtful but if a route to assisted dying becomes available, then this will mean that everyone has a greater opportunity to discuss death and dying more openly. I have already taken the opportunity to share my personal views on death and dying with those who act as my guardians. It's important to me that I can have open, honest conversations about how I want to live and die. If assisted dying is an option that I can access, then these discussions can mean that me and my loved ones can all know what to expect, be prepared on our own terms and have the opportunity to say our goodbyes (or not, if we choose not to tread this path).

Life and death don't always go to plan. A lot of us were never planned for but society doesn't enforce regulations on birth as long as the conception involved consenting adults. Why then does it prevent an adult with capacity, who has a terminal illness with no expectation of remission, from choosing not to prolong their suffering?

I'm not religious and that informs the way I think. I reject cultural or societal norms, or imposed conditioning, about how we should all consider death and that's why I think it's important to have the right to choose when and how we die, if we want to. I'm just a creature of the universe and I'd rather push up daisies than drag family, friends and society down with me, in any way, at this point. The cost on all of us is too much and there are alternative ways to support people to live and die in a way that respects their rights and protects them from harm. I just hope that I get the opportunity to be able to make that decision for myself.