

Mr. Chairman and Committee:

I am a retired physician. Two and a half years ago my 44 year old son, Eric, completed suicide using a gun. He had purchased the gun from a retailer in Olathe within 3 weeks of being discharged from a mental facility for an attempted suicide by overdose. Fortunately, we had discovered him in time to get him help at a hospital.

Suicide by firearms is the leading cause of gun deaths. It exceeds homicides by a ratio of 60/40. It is the most lethal means of suicide, with a very high rate of "success". Firearm dealers do not want to sell guns to those who would harm themselves, however there is no effective way of knowing who these people are. Most suicide victims are ambivalent about harming themselves, and suicides happen rather spontaneously when all hope seems lost. The rate of suicides is 300 times greater in the period immediately following discharge from a mental facility.

I had lunch with my son the day before he shot himself. He was completing the process of finalizing employment for a new employer, Olathe Medical Center, as a radiology technologist. Although he had been extremely distressed the prior week, and had been suffering from psychosis, he seemed to be looking forward to resuming his employment. However, without my knowledge, Eric had already purchased a gun two weeks earlier. The note he left described how confused he was and he didn't know what was going on in his mind. Eric left behind a 12 year old son, Aiden, whom he loved very much, and a trail of pain that extends far beyond that and continues to this day.

At the time, this legislation for voluntary self-reporting was tied up in committee with inaction. It had suffered the same fate in previous years. If a voluntary no-sell list had been an option for Eric, we could have explored it as a family upon discharge from the hospital. I believe Eric would have been willing to have this conversation about limiting future means for suicide by restricting access to guns with me and his therapists. If access to guns could have been restricted, my son might still be alive. I do not want to see this happen to another person. I strongly believe that in their most rational moments, those people in crises would like to be restrained from access to lethal means. Please pass this out of committee, and work to make it law.

Thank you,

Stephen R. Kunz M.D.