Physician-assisted death: The landscape now

Anthony Back MD
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“I had a quantum moment when I realized how bad this was. Then I googled it.”
1. Not just for social pioneers
Your life.
Your death.
Your choice.
“WHAT WE DO”

• **We provide** end of life counseling to...qualified patients who desire a peaceful death.

• **We encourage** advance care planning...

• **We promote** use of Physician Orders for Life-Sustaining Treatment...

• **We created** & played a key role in the coalition that passed Initiative 1000...

• **We advocate** for better pain management, patient-directed end of life care, & expanded choice for the terminally ill....
Google searches **United States** 2012-7:

hospice >> euthanasia > palliative care >
assisted suicide > end-of-life
Google searches **worldwide** 2012-7:

hospice > euthanasia > palliative care >
end-of-life = assisted suicide
“There’s...distrust about whether the delivery system is looking after your best interests.”
Persistent confusion?
An erosion of confidence?
A new public segment?
2. From a ‘last resort’ to a gift exchange
At His Own Wake, Celebrating Life and the Gift of Death

Tormented by an incurable disease, John Shields knew that dying openly and without fear could be his legacy, if his doctor, friends and family helped him.

By CATHERINE PORTER    Photographs and video by LESLYE DAVIS    MAY 25, 2017
“The orchestration isn’t for me—it’s for your loved ones.”
Choreographed?
Scripted?
Managed?
3. A public learning curve
California Data Report June-Dec 2016

191 prescriptions
173 physicians
1.1 prescriptions/physician

https://www.cdph.ca.gov/Programs/CHSI/Pages/End-of-Life-Option-Act-.aspx
“My patient deserved an evaluation by a physician like Dr. [X], not someone like me, with no training in this area and ambivalence to boot.”
“Not a lot of experience on the medical side...my PCP was willing...even though he had never done it.”
Implementing a Death with Dignity Program at a Comprehensive Cancer Center

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ABSTRACT

BACKGROUND
The majority of Death with Dignity participants in Washington State and Oregon
Oregon Physicians’ Attitudes About and Experiences With End-of-Life Care Since Passage of the Oregon Death with Dignity Act

Context  The Oregon Death with Dignity Act, passed by ballot measure in 1994 and enacted in October 1997, legalized physician-assisted suicide for competent, terminally ill Oregonians, but little is known about the effects of the act on clinical practice or physician perspective.

Objective  To examine Oregon physicians’ attitudes toward and practices regarding care of dying patients since the passage of the Death with Dignity Act.

Design, Setting, and Participants  A self-administered questionnaire was mailed...
For responding to requests:

1. LISTEN to the reasons.
2. ELICIT values and goals.
3. AUGMENT the care plan.
4. REVIEW the legal requirements & your position.
5. NEGOTIATE next steps.
“This is my job. I do it well.”

STEFANIE GREEN
Can we scale volunteers? What training + systems? How do physicians adjust?
4. The data needed now
“Make sure good data gets out...is it a problem or is it a good thing?”
TOTAL NUMBER OF OFFICIAL REPORTED EUTHANASIA ACTS IN BELGIUM

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Individual experience level? Population & system level?
1. The idea is commonplace.
2. It’s changing the experience of dying.
3. Physicians are learning in public.
4. Patients want data that helps them.