

The background of the slide features abstract, flowing waves in shades of red, orange, and yellow, creating a dynamic and modern aesthetic.

Euthanasia and PAS: Medical students' perspectives

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OUTLINE

- ~~Background~~
- Study design
- Results
 - Attitudes
 - Who is eligible?
 - Decision
 - Preferred method
- The future?
- Personal choices
- Final thoughts
- Acknowledgements

STUDY DESIGN

Objective:

Ascertain the views of SU medical students regarding E/ PAS and their stance on its legalisation in SA.

Methods:

- Design

Paper-based, 16Q, semi-quantitative, questionnaire

- Sampling

Convenient sampling method

- Subject population

3rd – 5th year, SU FMHS MB, ChB students

Data collection & analysis:

April 2016 – March 2017

Thematic analysis – qualitative data (Excel ®)

Frequency tables – quantitative data (Word®)

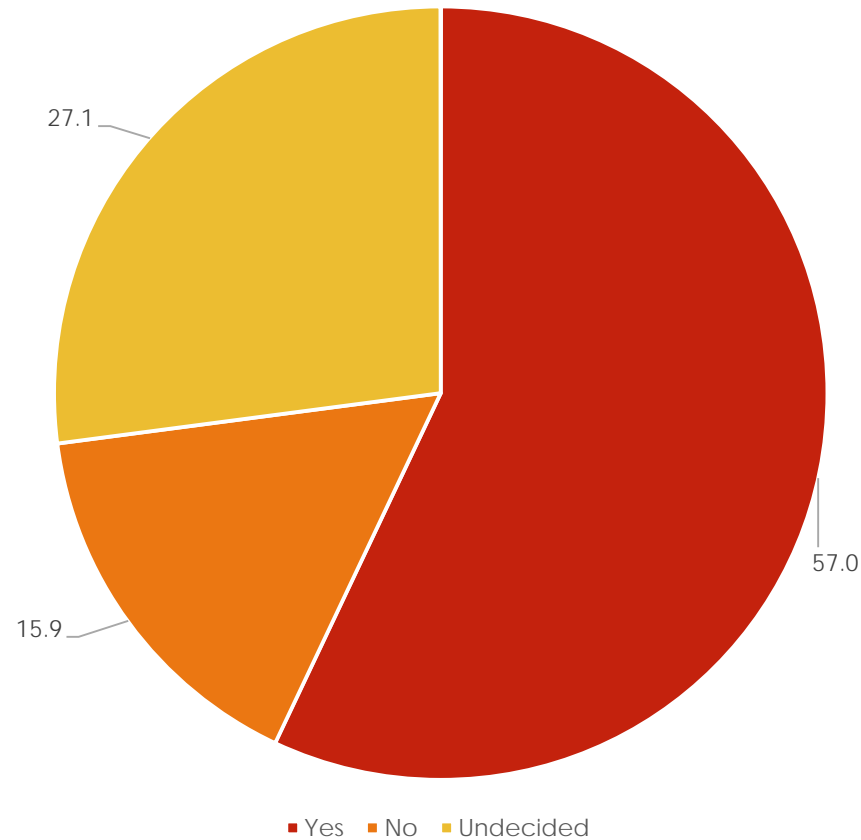
RESULTS

- Overall response = 69.25% (277/400)

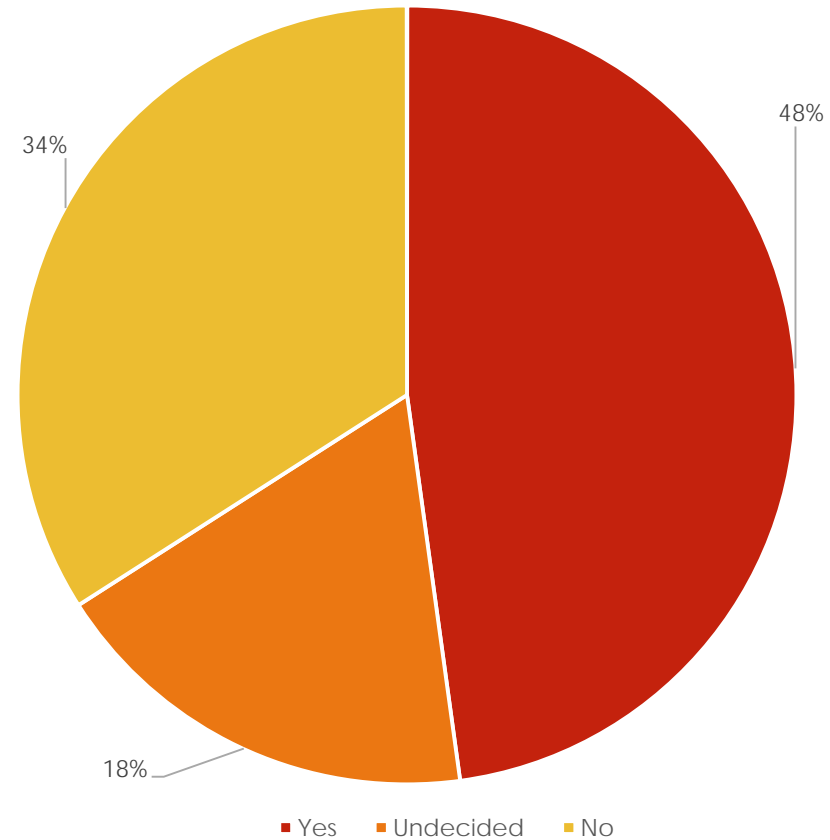
| Religious affiliation | Male n (%) 86 (31%) | Female n (%) 191 (69%) | Total n (%) 277 (100%) |
|-----------------------|---------------------------|------------------------------|------------------------------|
| Christianity | 59 (68.6%) | 136 (71.2%) | 195 (70.4%) |
| Islam | 13 (15.1%) | 33 (17.3%) | 46 (16.6%) |
| Judaism | - | - | - |
| Hinduism | 1 (1.2%) | 6 (3.1%) | 7 (2.5%) |
| Agnostic | 12 (14%) | 11 (5.8%) | 23 (8.3%) |
| Not specified | 1 (1.2%) | 5 (2.6%) | 6 (2.2%) |

ATTITUDES TOWARD E/ PAS

Pt. should be allowed to decide when to die

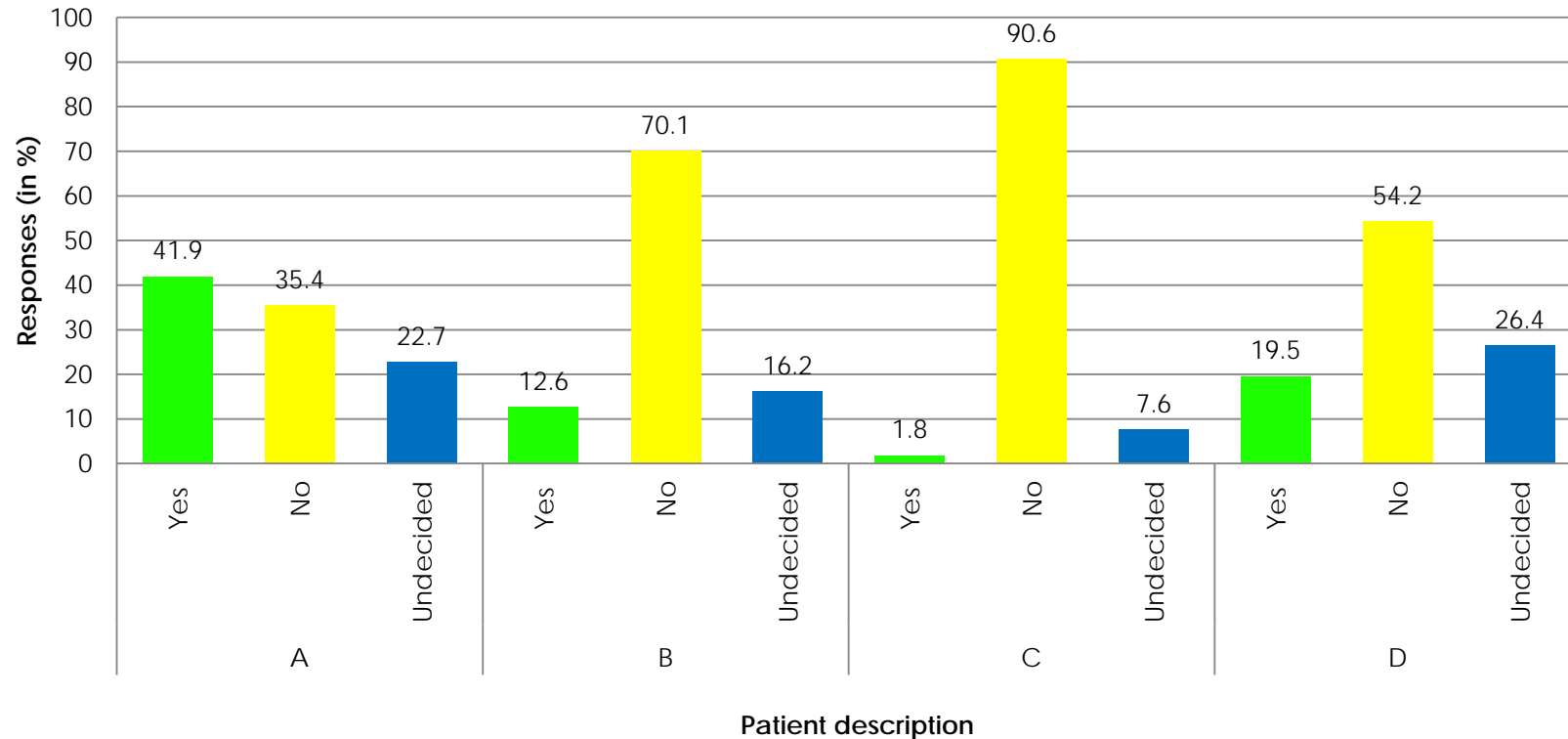


Drs should be able to help pts end their life

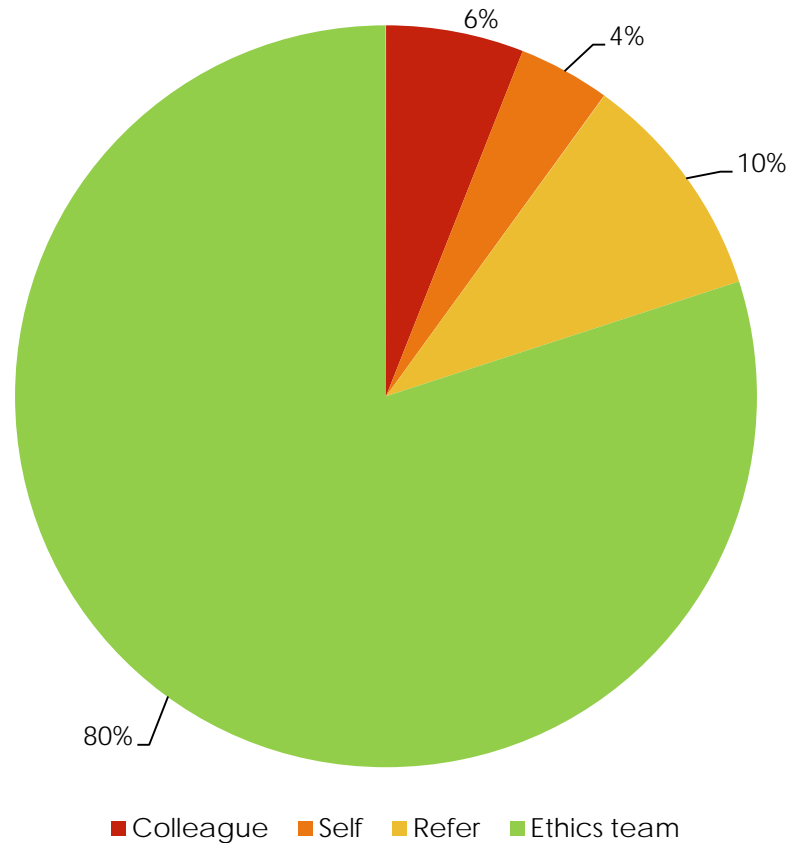


WHO IS 'ELIGIBLE' FOR E/ PAS?

Pt. 'types' requesting E/ PAS



WHO SHOULD DECIDE?



Ethics committee

- Team decisions are generally better than individual based decisions.
- Ethics committees are generally better equipped to deal with and come to an objective decision regarding who is eligible for life ending interventions.
- A decision taken by an ethics team ensures that the doctor is protected from whatever consequences may ensue.

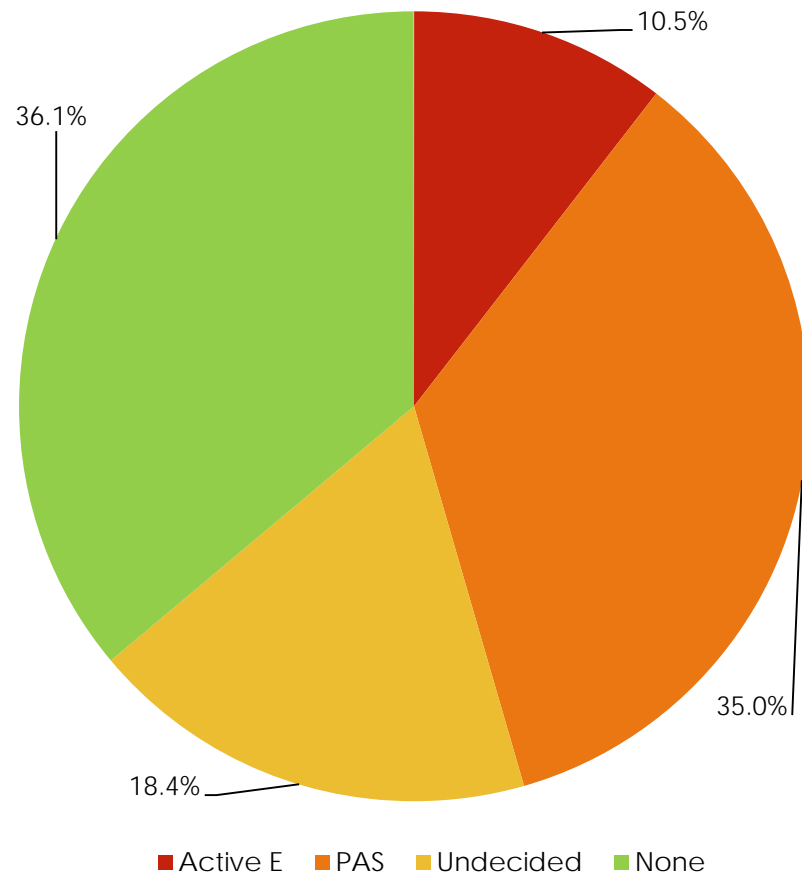
Refer the patient

- Not to be 'burdened' by the decision.

Consult a colleague/ decide self

- Ethics committees take too long.

PREFERRED METHOD TO HASTEN DEATH



None

- Goes against religious/ personal morals/ beliefs.
- A doctor should aim to preserve life, not shorten/ end it.

PAS

- Not to be directly involved in the patient's death (some participants' feel that active euthanasia is equivalent to murder).
- Individual will have a 'clear' conscious (by not being directly involved).

Undecided

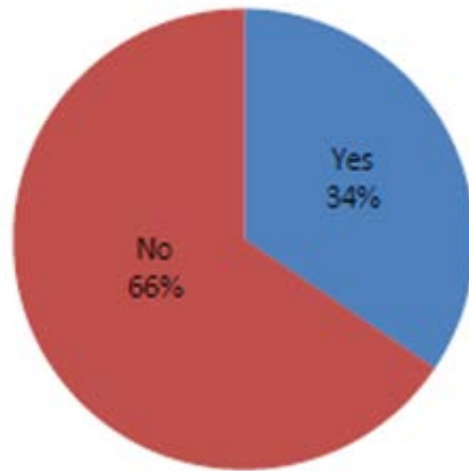
- No reason provided

Active euthanasia

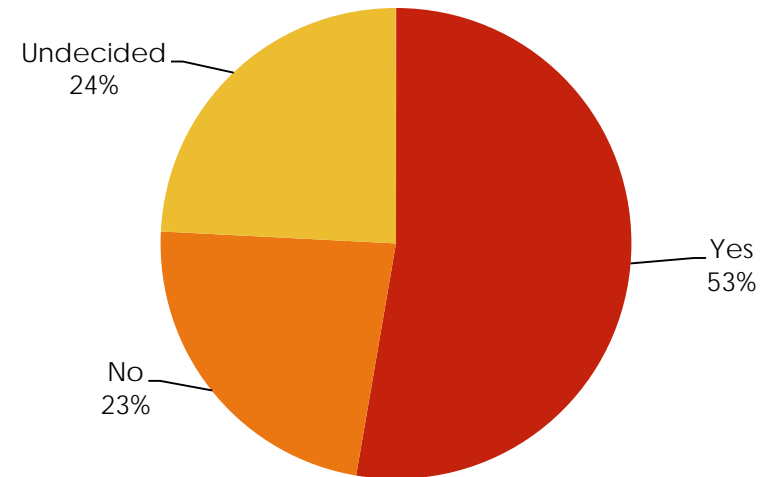
- More control over situation with less room for error.

THE FUTURE?

Patient requested to hasten their death*



Should E/ PAS be legalised in SA?



Arguments supporting legalising euthanasia/ PAS

- Patient autonomy
- Relief of suffering

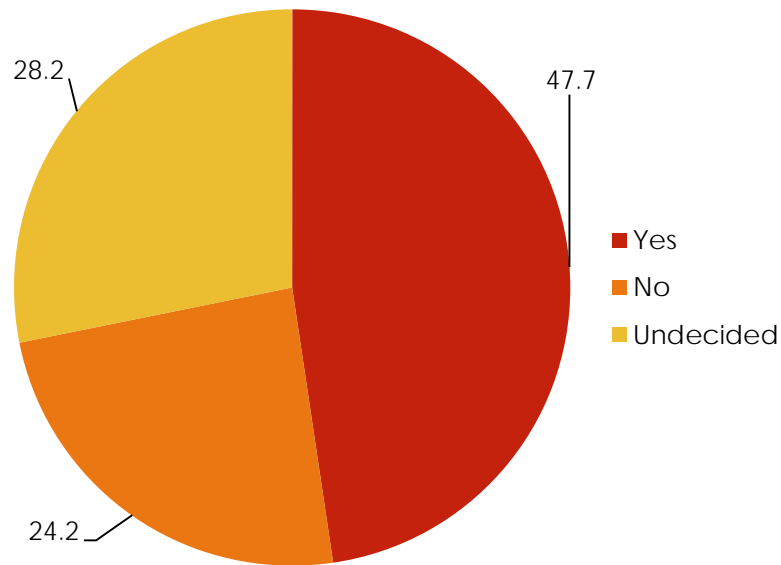
Arguments opposing legalising euthanasia/ PAS

- Doctor's oath – to preserve life
- Morally wrong – against personal/ religious worldview
- Slippery slope – towards active involuntary euthanasia

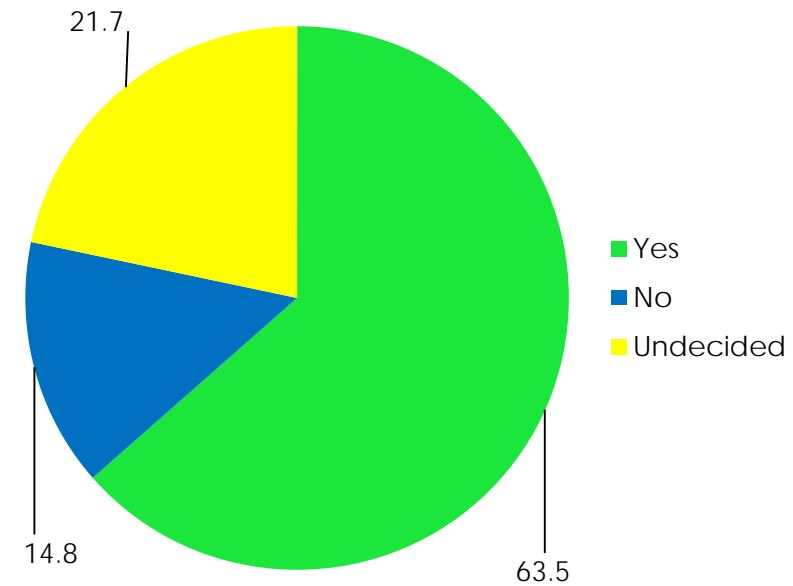
* - Ethics Institute of South Africa. Survey of Doctors' Attitudes to Assisted Dying. Johannesburg: Ethics Institute of South Africa, 2011.

PERSONAL CHOICES

Support loved-one who wishes to opt
for E/ PAS



Persuade pt. for palliative care option

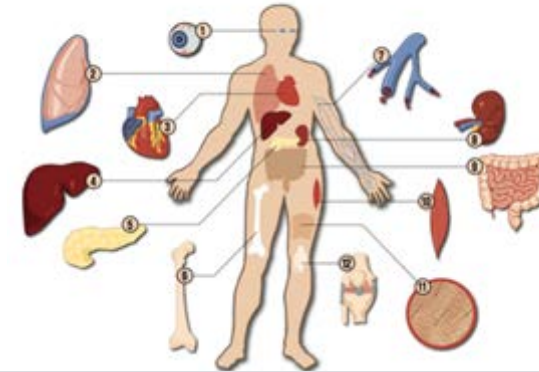


FINAL THOUGHTS

- Reason for majority of students (54.2%) being opposed to assisting a patient with intractable psychiatric condition with E/ PAS?



GIFTS OF DONATION
Organs and Tissues: Their Functions





ACKNOWLEDGMENTS

- Melany L Hendricks – Head of Clinical Psychology Department. Principal Clinical Psychologist / Senior Lecturer Stikland Hospital / Stellenbosch University.
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THANK YOU