

Depression and personality disorders drive psych patients to euthanasia

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Depression and personality disorders are the most common diagnoses among Belgian psychiatric patients requesting help to die, on the grounds of unbearable suffering, finds research published in the online journal *BMJ Open*.

Drugs, given either by mouth or administered intravenously, are used to



perform euthanasia in Belgium, where the practice has been legal since 2002.

The researchers wanted to find out if there were any discernible patterns in requests for euthanasia among mentally ill <u>patients</u> in Belgium in a bid to inform recommendations for future research.

So they tracked requests for help to die, made by patients receiving treatment for <u>psychiatric problems</u> in outpatient clinics in the Dutch speaking part of Belgium between 2007 and 2011, and followed up to the end of 2012.

During this period, 77 women and 23 men asked for euthanasia on the grounds of unbearable suffering associated with mental illness. Their average age was 47, but this ranged from 21 to 80.

Most (91) of the patients had been referred for counselling. Seventy three had been deemed medically unfit to work, and 59 were living alone.

Ninety had more than one mental health issue, with depression (58 patients) the most frequent diagnosis, followed by personality disorder (50).

Thirty eight patients required further tests and/or treatment, 13 of whom were specifically tested for autistic spectrum disorders. Twelve were subsequently diagnosed with Asperger's syndrome, a form of high-timetioning autism.

In all, 48 of the requests were accepted, and 35 carried out. Among the remaining 13, eight cancelled or delayed the procedure on the grounds that simply having the option gave them enough peace of mind to continue living.



By December 2012, 43 of the patients had died, including six who had taken their own lives. Among this group, one patient committed suicide because she found the approvals process too long, while another did so because her family had objected to euthanasia. A third woman killed herself after a spell in a psychiatric ward.

Another had died as a result of palliative sedation by the end of 2012, and one had died of the eating disorder, anorexia nervosa.

Thirty patients died surrounded by family/friends, and in a serene and positive atmosphere, "which would have been impossible to attain in the case of unassisted traumatic suicide," note the authors.

In 2010 and 2011, 2086 patients died by <u>euthanasia</u> in Belgium, accounting for 1% of all deaths during that period, with those who were not terminally ill making up less than 10% of the total.

But as yet, there is no consensus on what constitutes 'unbearable suffering,' nor are there any guidelines in Belgium on how best to deal with requests for help to die from those who are mentally ill, say the researchers.

"Taking into account the ongoing fierce ethical debates, it is essential to develop such guidelines, and translate them into clear and detailed protocols that can be applied in practice," they conclude.

More information: Euthanasia requests, procedures and outcomes for 100 Belgian patients suffering from psychiatric disorders: a retrospective, descriptive study, *BMJ Open*, <u>DOI:</u> 10.1136/bmjopen-2014-007454



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