

The right to say "No"

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In psychiatric wards, patients used to be medicated indiscriminately against their will for decades if doctors thought it necessary. It was only after a Federal Constitution Court ruling a few years ago that patient autonomy has been strengthened. What does that mean in practice? A report has been published in the science magazine RUBIN.

High hurdles for compulsory treatment

Lawyer Dr Tanja Henking heads the RUB junior research group "Ethics and Law in Modern Medicine." She carries out the academic documentation of the legal development regarding compulsory treatment, focusing strongly on its practical application. "Under the new legislation, doctors have still the option to administer heavy medication to a psychotic patient. But the hurdles are now high. Unlike previously, they now require a warrant issued by the court. In order to obtain it, the doctor has to prove that the treatment is appropriate and that there are no alternatives to it," says Henking.

Previous regulations are unconstitutional

It wasn't until individual patients filed a suit at the Federal Constitution Court to protest against the compulsory treatment they had received that the court ruled in 2011 and 2013 that the procedure had no sufficient legal foundation. The court rescinded the current provisions under federal state law and ruled them to be unconstitutional; it judged that each treatment carried out against an individual's will constitutes a severe infringement of the right to physical integrity and autonomy.

Drugs are more lucrative than talks

Tanja Henking welcomes this amendment. First and foremost, she makes a case for considering the [new legislation](#) a chance for reflecting about the approach in psychiatric wards to date and to draw conclusions for ways of treating mentally ill patients with dignity. Henking believes that this includes, first and foremost, a more serious search for alternatives to psychotropic drugs. The healthcare system offers no incentives to do so. "At present, clinics make more money through short-term application of drugs than through time-consuming patient talks."

New practice guidelines

Tanja Henking knows how difficult it is for doctors to make decisions in acute phases that would be most beneficial for the patient. Often, they are not adequately informed about the legal framework underlying their treatment. This state of affairs has given the lawyer reason to publish, together with her colleagues, guidelines for compulsory treatment of mentally ill patients. The book, which has been just released, provides instructions to treating physicians on how to act in situations with which they will be repeatedly confronted. In addition, the author illustrates ways for avoiding compulsory measures or for reducing the negative impact of compulsory measures once they have been applied.

More information: Compulsory treatment guidelines:
www.springer.com/de/book/9783662470411

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