

## Should physicians assist terminally ill patients with death by fasting?

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When terminally ill patients wish to hasten death by fasting, should physicians assist them to do so? LMU ethicist Ralf Jox argues that voluntary stopping of eating and drinking is often equivalent to assisted suicide, and that the practice should be regulated.



Many people suffering from debilitating and incurable illnesses or elderly patients who are frail and incapacitated sometimes choose to stop eating and drinking as a means to hasten their death. The decision is often accompanied by a request for medical assistance to ease the distress that can ensue after stopping eating and drinking. According to a new study on the ethical evaluation of these situations, the presumption that death by voluntary fasting can be viewed as 'natural' is flawed. "Dying by voluntary stopping eating and drinking (VSED) is a form of suicide, and the provision of medical assistance towards that end would, at least in some cases, be equivalent to suicide assistance," says medical ethicist Ralf Jox, Assistant Professor at the Institute for the Ethics, History and Theory of Medicine at LMU Munich.

This assessment is based on an ethical analysis, carried out in collaboration with specialists in the field of <u>palliative medicine</u> based at the Technical University of Munich (TUM) and Lausanne University Hospital, and an expert in health law from the University of York. The study appears in the journal *BMC Medicine*. The analysis considers a range of scenarios, which demonstrate that, in many cases, patients would be unable to carry out their intention of fasting to the death without substantial medical assistance.

The authors therefore recommend to legally regulate medical assistance in the context of VSED consistent with the regulation of assisted suicide, where usually a lethal substance is provided by the assisting person. In Germany, assisted suicide is subject to strict legal limits. A law passed in December 2015 explicitly prohibits any professional or regular assistance in suicide. The German Medical Association has repeatedly rejected suggestions that medically assisted suicide be permitted under clearly defined conditions. "In contrast to this position, however, voluntary stopping of eating and drinking is nevertheless prefered by doctors' organizations such as the German Society for Palliative Medicine," Jox points out.



The whole issue of medically supported suicide in Germany is currently under the highest legal scrutiny: The Federal Constitutional Court is in the process of deciding whether or not the law from 2015 is compatible with the provisions of the Constitution. The result of these deliberations is likely to have consequences for the practice of VSED, says Jox, who hopes that the new study will help to clarify the position with respect to the ethical and legal evaluation of medically supported VSED.

**More information:** Ralf J. Jox et al. Voluntary stopping of eating and drinking: is medical support ethically justified?, *BMC Medicine* (2017). DOI: 10.1186/s12916-017-0950-1

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