

# Does grief depend on how the loved one died?

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Is the grief experience different for individuals who have lost a loved one by medical assistance in dying (MAiD) compared to natural death

with palliative care (NDPC)?

Philippe Laperle examines this sensitive issue in a recent article published in the *Journal of Death and Dying*, based on his Ph.D. research under the supervision of Marie Achille of the University of Montreal's Department of Psychology and Deborah Ummel of the Université de Sherbrooke's Department of Psychoeducation.

Previous research suggests that [grief](#) following the medically assisted [death](#) of a loved is no more challenging or complex than grief in other dying contexts, including sudden natural death or suicide. Some studies have even concluded that it may be easier.

## **Comparing two groups of bereaved individuals**

To date, however, no one has compared bereavement following the loss of a loved one by MAiD and by NDPC, considered the "gold standard" in in end-of-life care and death preparation.

Laperle recruited 60 subjects who had been bereaved for at least six months. Twenty-five of them had lost a loved one by MAiD and 35 by NDPC. In the majority of cases (48), the cause of death was cancer.

The 51 women and 9 men first completed two questionnaires assessing different aspects of grief, symptoms of distress and the presence of prolonged grief disorder requiring professional psychological support. This quantitative component was followed by in-depth interviews with 8 members of each group.

## **No overall differences, but a diversity of experiences**

Contrary to his initial hypothesis that grief would be easier after MAiD

than after natural death, Laperle did not observe any significant differences in intensity or distress between the two groups.

The low scores for distress symptoms indicate that "these two contexts tend to make grief easier in certain respects," said Laperle, "although some bereaved individuals still reported a more difficult grief experience characterized by depression and guilt."

The interviews showed that the experiences of the bereaved were diverse and, sometimes, mixed in both groups. And that the traces, or "imprints," left on the bereaved individual by their loved one's final moments and the separation brought by death could be painful, comforting or both at the same time.

"When preparation for death and acceptance of its coming unfold at a similar pace in the dying person and their loved one, the two arrive at the same point mentally and emotionally at the time of death, which makes the subsequent grieving process easier," explained Laperle. "But if one of them accepts the impending death while the other remains in denial, this leaves imprints that are more difficult to overcome."

But regardless of whether the loved one passed away by MAiD or naturally under palliative sedation, in which case the person gradually slips into unconsciousness and death, some bereaved individuals felt the process was rushed. In general, those who were in synchrony with their loved one experienced the death more serenely and felt it came at the right time.

Differences were also found in the subjects' memories of the loved one. In the case of MAiD, some of the bereaved remembered the departed as a "hero" who embodied values of freedom, control, courage and/or immortality. In the case of NDPC, the departed was more likely to be remembered as the embodiment of a beauty that never fades completely

although it withers. Others felt left behind by their hero, which created a even greater void after their passing.

"It's important to remember that every grieving process is different and that not everyone will be left with the same imprints," said Laperle. "In general, imprints fluctuate over time, arising momentarily to then dissipate and even transform. Other factors also impact grief, including the person's relationship with the deceased and degree of involvement during the illness. These factors can increase or decrease the effects of the imprints left by MAiD or NDPC."

**More information:** Philippe Laperle et al, To Lose a Loved One by Medical Assistance in Dying or by Natural Death with Palliative Care: A Mixed Methods Comparison of Grief Experiences, *OMEGA—Journal of Death and Dying* (2022). [DOI: 10.1177/00302228221085191](https://doi.org/10.1177/00302228221085191)

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