

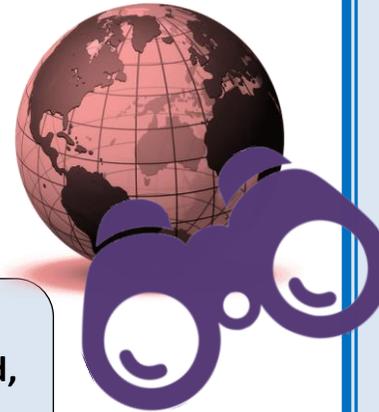
## Monitoring assisted deaths



Monitoring care is crucial to safeguard patients



But there are problems with the way assisted deaths are monitored, which greatly limits any conclusions about safety



### Looking back

- **All assisted death legislations in the world monitor decisions after the assisted death**
- **The decision-making process is not monitored before the death**
- **There is little or no monitoring of the death itself**
- **Any data is provided by the prescriber of the lethal drugs**

### Examples of problems

- **In Oregon, all source documentation on assisted deaths is destroyed one year after the annual report, making it impossible to review decisions.<sup>1</sup>**  
**Information on complications in 2020 was missing in 71% of assisted deaths<sup>2</sup>**
- **In the Netherlands, monitoring committees focus on procedure rather than whether the decision was right,<sup>4</sup> and 1 in 5 of assisted deaths are not reported<sup>5</sup>**
- **In Belgium, 48% of assisted deaths were not reported<sup>6</sup>**
- **In Canada, statistical data is sketchy and there is no information on the adherence to eligibility criteria and safeguards<sup>7</sup>**

### References

1. [Oregon Health Authority : Frequently Asked Questions : Death with Dignity Act : State of Oregon](#) (see Q: Are participating patients reported to the Oregon Health Authority by name?)
2. Oregon Death with Dignity Act: annual reports. <http://www.oregon.gov/oha/PH/PROVIDERPARTNERRESOURCES/EVALUATIONRESEARCH/DEATHWITHDIGNITYACT/Pages/ar-index.aspx>
3. Cohen J, Dierickx S, Penders YWH, Deliens L, Chamberle K. How accurately is euthanasia reported on death certificates in a country with legal euthanasia: a population based study. *European Journal of Epidemiology*, 2018; **33**: 689–693. <https://doi.org/10.1007/s10654-018-0397-5>
4. Miller DG, Kim AYH. Euthanasia and physician-assisted suicide not meeting due care criteria in the Netherlands: a qualitative review of review committee judgements. *BMJ Open*, 2017; **7**(10): e017628. doi: [10.1136/bmjopen-2017-017628](https://doi.org/10.1136/bmjopen-2017-017628)
5. Onwuteaka-Philipson BD *et al*. Trends in end-of-life practices before and after the enactment of the euthanasia law in the Netherlands from 1990 to 2010: a repeated cross-sectional survey. *Lancet*, 2012; **380**: 908-15 [https://doi.org/10.1016/S0140-6736\(12\)61034-4](https://doi.org/10.1016/S0140-6736(12)61034-4)
6. Smets T *et al*. Reporting of euthanasia in medical practice in Flanders, Belgium: cross sectional analysis of reported and unreported cases. *BMJ*, 2010; **341**: c5174. <https://doi.org/10.1136/bmj.c5174>
7. Kotalik J. Medical assistance in dying: challenges of monitoring the Canadian program. *Canadian Journal of Bioethics*, 2020; **3**(3). <https://doi.org/10.7202/1073799ar>