

Does legalising assisted deaths impact on vulnerable individuals?

V3



Q. Is there any evidence of risk to vulnerable individuals?

Official reports provide scant information

Missing information

Adherence to the eligibility criteria or safeguards ^{1, 2, 5-7}

Showing assisted death as the cause on death certificates ^{3, 4}

Process of decision making ^{1, 5-7}

Capacity assessments ⁵⁻⁷

Reasons for refusing or not using lethal medication ⁵⁻⁷

So, what evidence exists?

- 1 in 6 older people suffer abuse, including psychological and financial manipulation.⁸
- In 2020, 232 Canadian patients changed their minds about an assisted death, 22% immediately before receiving the drug⁶
- In 2020 in Oregon, 53% felt a burden and 6% had financial concerns⁷
- Some disabled Canadian patients have been offered an assisted death rather than treatment⁹
- The proportion of Belgian psychiatric patients receiving an assisted death rose 6-fold over a 10-year period¹⁰
- Of Dutch psychiatric assisted deaths, 55% were depressed, 27%, 11% had no independent psychiatric input, and 20% never had a psychiatric inpatient stay^{11, 12} Similar patients requesting an assisted death were more likely to be single, female, with a lower educational background, and with the commonest diagnosis being a depressive mood disorder¹³
- Learning disability and autism have become eligible criteria¹⁴

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