

Monitoring assisted deaths



Monitoring care is crucial to safeguard patients

But problems with the way assisted deaths are monitored, 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

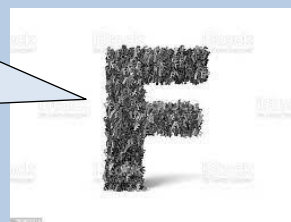


In Oregon, all source documentation on assisted deaths is destroyed one year after the annual report, making it impossible to review decisions.¹ Information on complications in 2020 was missing in 71% of assisted deaths²



In Belgium, 48% of assisted deaths were not reported and there are shortcomings in applying criteria, use of the independent doctor and official reporting^{6,7}

In Canada, statistical data is sketchy and there is no information on the adherence to eligibility criteria and safeguards⁸



In the Netherlands, monitoring committees focus on procedure rather than whether the decision was right,⁴ and 1 in 5 of assisted deaths are not reported⁵

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.
3. Cohen J, et al. *European Journal of Epidemiology*, 2018; **33**: 689–693.
4. Miller DG, et al *BMJ Open*, 2017; **7**(10): e017628.
5. Onwuteaka-Philipson BD et al. *Lancet*, 2012; **380**: 908-15
6. Smets T et al. *BMJ*, 2010; **341**: c5174.
7. Raus K et al.. *Journal of Medicine and Philosophy* 2021; **46**: 80-107.
8. Kotalik J. *Canadian Journal of Bioethics*, 2020; **3**(3).