



Poster ID:

ATTITUDES TOWARDS EUTHANASIA AND PHYSICIAN-ASSISTED SUICIDE AMONG PHYSICIANS AND PATIENTS IN A MULTI-CULTURAL SOCIETY OF MALAYSIA



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BACKGROUND AND OBJECTIVES

Due to globalization and changes in the health care delivery system, there has been a gradual change in the attitude of the medical community as well as the lay public towards greater acceptance of euthanasia as an option for terminally ill and dying patients. Physicians in developing countries come across situations where such issues are raised with increasing frequency. As euthanasia has gained worldwide prominence, we aim to explore the beliefs and attitude of our patients and physicians towards it and related issues.

METHODS

Questionnaire based survey among consenting patients and physicians. The independent variables such as race, religious beliefs and gender were included to determine their influence on the participants' attitude towards euthanasia. The patient categories included cancer patients on palliative care, HIV and AIDS, end stage renal failure on chronic haemodialysis, severe chronic obstructive pulmonary disease, diabetics with obvious medical complications and stroke victims. Data from 922 respondents (727 patients and 195 physicians) was collected during 2010-2011 and analysed using the Statistical Package for Social Sciences version 17.0 (SPSS Inc, Chicago, IL, USA). Chi-square χ^2 test was performed to compare the proportions between the physicians and patients and a p-value of less than 0.05 was taken as statistically significant.

RESULTS

The majority of our physicians and patients did not support euthanasia or PAS (EAS), no matter what the circumstances may be $p < 0.001$. Most of the respondents were believers. Both opposed to its legalization $p < 0.001$. Just 15% of physicians reported that they were asked by patients to assist in dying. Sixty two% of our patients and 70% of physicians were in favour of withholding or discontinuing artificial life support to a patient with no chances of survival or when the burdens outweighed the benefits. About 64% of physicians agreed that pain medication should be given to relieve suffering even if it would hasten the patient's death and 62% agreed that providing comfort was the primary objective rather than prolonging the life of a terminally ill patient.

Physicians' and patients' responses compared on individual items

		Physicians n=195	Patients n=727	p-value
Age, Median (IQR)		32.0(27.0-40.0)	53.0(42.0-62.0)	<0.001
Religious affiliation	Islam	133(27.7)	347(72.3)	<0.001
	Buddhism	27(15.50)	147(84.5)	
	Christianity	23(17.0)	112(83.0)	
	Hinduism	9(13.4)	58(86.6)	
	Others	3(4.5)	63(95.5)	
Belief in God	Yes	186(23.4)	608(76.6)	<0.001
	No	8(6.8)	110(93.2)	
	Not sure	1(10.0)	9(90.0)	
Belief in Life after Death	Yes	162(28.0)	417(72.0)	<0.001
	No	30(9.9)	273(90.1)	
	Not sure	3(7.5)	37(92.5)	
According to your religion, is euthanasia:	Approved	10(6.5)	143(93.5)	<0.001
	Approved conditionally	59(28.1)	151(71.9)	
	Prohibited	116(21.9)	414(78.1)	
	Not sure	10(34.5)	19(65.5)	
Do you think patients with terminal illness have the right to die?	Yes	42(13.6)	266(86.4)	<0.001
	No	152(26.3)	427(73.7)	
	Not sure	1(2.9)	34(97.1)	
Is it all right to discontinue artificial life support to a patient with no chance of survival?	Yes	57(11.3)	447(88.7)	<0.001
	No	138(35.0)	256(65.0)	
	Not sure	0(0.0)	23(100.0)	
Should doctors be legally allowed to prescribe medication to assist a patient to die?	Yes	31(10.6)	262(89.4)	<0.001
	No	163(28.8)	403(71.2)	
	Not sure	1(1.6)	62(98.4)	
Would legalizing euthanasia results in criminal abuse?	Yes	138(27.8)	359(72.2)	<0.001
	No	56(22.0)	198(78.0)	
	Not sure	1(0.6)	160(99.4)	

CONCLUSION

Only a minority of the physicians support EAS. Most of our patients did not favour it and had still a hope of cure. A clear association could be made with regard to the physicians and patients religiosity and opposition to EAS $p < 0.001$. Under current prevailing conditions the practice of medicine must not be guided by economic and political forces, but by ethics that is internal to the medicine. It entrusts and obligates the physicians to do what is in the best interest of the patient. The findings of our survey indicate that majority of respondents were against active EAS or its legalisation. It is hoped that future debates about legalisation can proceed with this evidence in mind.



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