

Ontario

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**MEMORANDUM TO ONTARIO CORONERS**

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A number of recent investigations have raised the concern as to whether the line between palliative care and physician-assisted death is being breached.

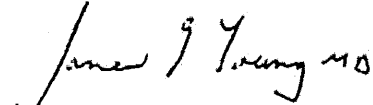
Many coroners are questioning whether excessive drug doses and appropriate drugs are being prescribed in some palliative situations and this could result in shortening or ending life. Physician-assisted death is not legal in Ontario.

It is also apparent that there is increased anxiety on the part of health care professionals as to what constitutes acceptable palliative care.

Palliative care has been and remains an accepted and desirable part of medical practice in appropriate circumstances. The aim of palliative care medicine is to improve the quality of life for patients who cannot be cured. If, in providing this care, a patient's life expectancy is shortened as a by product, this is thought of as an acceptable, although not necessarily desirable, trade off.

But the concept of palliative care has not been extended to the point of intentionally hastening a patient's death. The choices of which drugs are used and the doses prescribed should be appropriate to the size and condition of the patient. Drugs should be prescribed in gradually increasing doses as the patient's tolerance to lower doses becomes apparent. Sudden, massive increases in amount or new combinations of drugs in quantity should lead to questions of intent and whether the treatment is palliative or has become physician-assisted death.

Coroners should be very careful in investigating hospital, institutional and home deaths to take careful note of the terminal sequence of events as well as drug choice and dosage. If concerns arise, please contact your regional coroner for assistance. The investigation of such issues can be very complex and the regional coroner can offer valuable help.

A handwritten signature in cursive script that reads "James G. Young M.D.".

James G. Young, M.D.  
Chief Coroner for Ontario.

JGY:fl