Trends in euthanasia and assisted suicide

Two new studies have investigated trends in euthanasia and assisted suicide in Belgium and the Netherlands. Marianne Snijdewind and colleagues' study focused on practices at a Dutch clinic for people whose previous requests for euthanasia or assisted suicide have satisfied the legal requirements but have nonetheless been rejected. During the first year, the clinic answered 645 requests for euthanasia or assisted suicide, of which 162 (25.1%) were granted. Overall Dutch physicians agreed to 32-45% of such requests-the smaller proportion at the clinic is to be expected given that these patients had been previously declined.

Patients with cancer represent 79% of all euthanasia and assisted suicide deaths in the Netherlands. They only formed 22.8% of the granted requests at the clinic, probably because physicians are more willing to agree

to cancer patients' requests, so fewer attend the clinic in the first place. Patients who were married or living with their partner and those who had more than one child also had a greater chance of seeing their request granted. The investigators wrote that this suggested "that the views of family and domestic partners are important and that their involvement and support influence the clinic's decisions".

In a research letter, Sigrid Dierickx and colleagues compared Belgian requests for euthanasia in 2013 with those of 2007. "The prevalence of euthanasia increased in all patient groups and in all health care settings", noted the investigators. 10.4% of patients with cancer in the country died through euthanasia in 2013. In 2007, the proportion was 5.6%. The likelihood of a patient with cancer having a request for euthanasia granted increased from 64.4% to 77.5% over the same period. The investigators attributed the results to physicians becoming increasingly comfortable with the practice of euthanasia, a wider acceptance of its place in palliative care, and shifting attitudes in the population at large.

"Eventually all civilised countries will legalise euthanasia and assisted suicide—it is really just a matter of time", commented Julian Savulescu (Oxford University, Oxford, UK). He points out that fears of people being pressurised into suicide have not been borne out by the Dutch or Belgian experience. "People want to have control over their death, and there is no reason for the state to intervene in the liberty of one individual to access assisted suicide or euthanasia when another individual is prepared to provide it", he said.

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For Snijdewind and colleagues' study see JAMA Intern Med 2015; published online Aug 10. DOI:10.1001/ jamainternmed.2015;3978 For Dierickx and colleagues' study see JAMA Intern Med 2015;

study see JAMA Intern Med 2013 published online Aug 10. DOI:10.1001/ jamainternmed.2015.3982