



END-OF-LIFE CARE

Maj.Gen.Asst.Prof.Dr.Kidaphol Wadhanakul,MD.
International Relations, Medical Association of Thailand



Medical Association of Thailand

MAT 2017 summary: Symposium
QUESTIONNAIRE ABOUT END-OF-LIFE CARE

Maj. Gen. Assist.Prof.Dr.Kidaphol Wadhanakul, M.D.

Medical Association of Thailand, International Relations

The awakening of the right to die in Thai society has become a growing concern for more than 10 years. From the efforts to push the National Health Act over the past six years, there are many groups, which consist of members from various occupational groups who care for the patient. **Thai National Health Bill, Section 10 states that "A person has the right to make a statement of intent not to seek health services that are just to prolong the death of his or her last moments of life or to end suffering from illness"**

The right to die is still an issue that cannot be resolved. **It is a rare acceptance in Thai society.** Because most Buddhists in Thailand see suicide as a sin and contrary to the feelings of the people in society. So the government still chose not to implement such a policy. Fortunately, **Buddhism teaches Thai people about living with strong mind and many terminal end-stage patients stay at home. Thais will prepare themselves to look at life while living and at the end of life, consistent with the doctrine of Buddhism. Consider everything as impermanent.** Choosing to die when faced with the last resort of life should hold the key factors that make people leave is calm and dignity. While those who are alive do not feel "lost" to what is beloved or "end of burdens" to take care of, these two feelings are completely different.

Q1-1. In your country/jurisdiction, is there any legislation (including laws and court rulings) that permits/tolerates the involvement of a physician in “active euthanasia and/or assisted suicide” for terminal patients?

- Yes, there is. *Please comment (if any).
- No, there isn't. *Please comment (if any).

Q1-2. If not, are there any exceptions?

- Yes, there are exceptions. *Please comment (if any).
- No, there is no exception. *Please comment (if any).

2. Questions regarding an Advance Directive (Living Will)*

Q2-1. Is there any legislation regarding an advance directive (living will**) in your country/jurisdiction?**

Yes, there is.

The awakening of **the right to die** in Thai society has become a growing concern for more than the past 10 years.

From the efforts to push the **National Health Act** over the past six years, there are many groups, which consists of members from various occupational groups who care for the patient.

No, there isn't. *Please comment (if any).

2. Questions regarding an Advance Directive (Living Will)*

Q2-2. Do physicians routinely encourage their patients in daily practice to reflect on and express their preferences about specific **medical interventions (e.g. pain management, medically administered nutrition and hydration, mechanical ventilation, use of antibiotics, dialysis, or cardiopulmonary resuscitation), or to identify someone they would want to have make decisions on their behalf if they did not have decision-making capacity?**

- Yes, they do. *Please comment (if any).
The doctor will just offer the **choices of treatment and the result** as a holistic approach.
But the **patient's relatives will have to make decisions** on their behalf.
- No, they don't. *Please comment (if any).



Q2-3. Is there any active effort by your medical association or any other organization to establish a custom for physicians to check the advance directives (living wills**) of their patients?**

Yes, there are such efforts. *Please describe (if possible).

Thai Medical Council : Draft statement of the rights of patients, **Article 9** said.

"The patient has the **freedom to refuse any treatment** that extends his life. By his perception that extending that life would diminish the quality of human life. This includes the right of the patient to refuse the treatment, **writing in advance**, while being **well-informed**."

No, there isn't. *Please comment (if any).



3. Questions regarding Withholding or Withdrawing of Life-sustaining Treatment*

Q3-1. In your country/jurisdiction, is there any legislation (including laws and court rulings) that permits/tolerates the withholding of life-sustaining treatment for a terminal patient based on the patient's will to make dying as dignified and comfortable as possible?

Yes, there is (legislation, law, court ruling, any other).

*Please specify the names/dates of the enforcement of those laws or the dates/contents of those court rulings (if possible).

No, there isn't. *Please comment (if any).

The right to die is still an issue that can not be resolved.

It is a rare acceptance in Thai society.

Because most ***Buddhists in Thailand claim suicide as a sin*** and contrary to the feelings of the people in society.

So the government still chose not to implement such a policy.



Q3-2. In your country/jurisdiction, is there any legislation (including laws and court rulings) that permits/tolerates the withdrawing of life-sustaining treatment **based on the patient's will to make dying as dignified and comfortable as possible if it is found after the life-sustaining treatment is initiated in case of emergency **that the patient would not have wanted it**?**

Yes, there is

No, there isn't. *Please comment (if any).

Thai National Health Bill, Section 10 states that a person has the right to make a statement of intent **not to seek health services that are justifiable to prolong his or her death in the last resort.**

The morbidity of the Medical Council is as follows;

1. **A team of at least 3 physicians**, the **patient's doctor, neurologist and neurosurgeon** (if any)
2. Must not include the doctor who transplanted that organ.
3. Hospital Director to certify the diagnosis of brain death as a death certificate.

Q3-3. Please describe the views and approaches of your medical association regarding withholding or withdrawing of life-sustaining treatment (*if any).

Writing a Letter of Intent also known as **Living Will**, for example, may wish to refrain from self-aggrandizement in the time of death or death, etc.

4. Questions regarding Palliative Care including End-of-life Care

Q4-1. What kind of treatment is generally provided for **pain or suffering (both physical and psychological) of terminal patients in your country/jurisdiction?**

Those who come to the hospital, **Palliative care** with modern medicine give them least amount of pain.

Q4-2. Does **religion play any roles in these treatments, especially for psycho-social, and spiritual suffering?**

Yes, religion plays roles. *Please describe (if possible).

Fortunately, **Buddhism teaches Thai people about living with strong mind and many terminal end-stage patients stay at home.**

*Thais will prepare themselves to look at life and the end of life, consistent with the doctrine of Buddhism. **Consider everything as impermanent.**

*Choosing to die when faced with the last resort of life should hold the key factors that make people leave is calm and dignity.

*While those who are alive **do not feel "lost"** to what is beloved or **"end of burdens"** to take care of, these two feelings are completely different.



When one has the feeling of dislike for evil, when one feels tranquil, one finds pleasure in listening to good teachings; when one has these feelings and appreciates them, one is free of fear.



QuoteHD.com

Buddha

Indian Prince,

founder of Buddhism

(563 BC - 483 BC)

Medical Association of Thailand



Q4-3 Does palliative care provided in your country/jurisdiction commonly involve modern medications such as opioid and new analgesics for pain and suffering experienced by terminal patients?

- Yes. *Please comment (if any). **Morphine .. ect.**
- No. *Please comment (if any).

Q4-4 If not, what are the causes for not doing so?
*** Multiple choices allowed.**

- Due to the economic circumstances
- The prevalence of restrictive laws or regulations enforced by the government (e.g. limiting access to pain medication).
- Due to the patient's religion or faith**
- Due to the physicians, nurses and other health professionals' lack of education/knowledge on palliative care
- Any other (*please specify).



Q4-5. Although palliative care is an important part of end-of-life care, it isn't limited to that stage. In your country/jurisdiction, is palliative care widely provided to patients with any serious illness and who have physical, psychological, social, or spiritual distress?

Yes. *Please comment (if any).

Man does not feel guilty, helping the suffered horse die from a broken leg from the race.

But for human life, we are pleased to see that the end-stage patient a chance to survive with sophisticated medical technology and high prices. We often think of helping our loved ones, although just prolonged life for only a short period.

No. *Please comment (if any).

Q 5-1. In your country, do you have a law or regulation related to the problem described above?

Yes.

No.(comment if any)

5-2. If you don't have such a law or regulation, is there any national policy by the government or guidelines of a medical association or medical stakeholder for a physician to decide a treatment plan for such patients described above?

Yes.

Thai National Health Bill, Section 10 states that

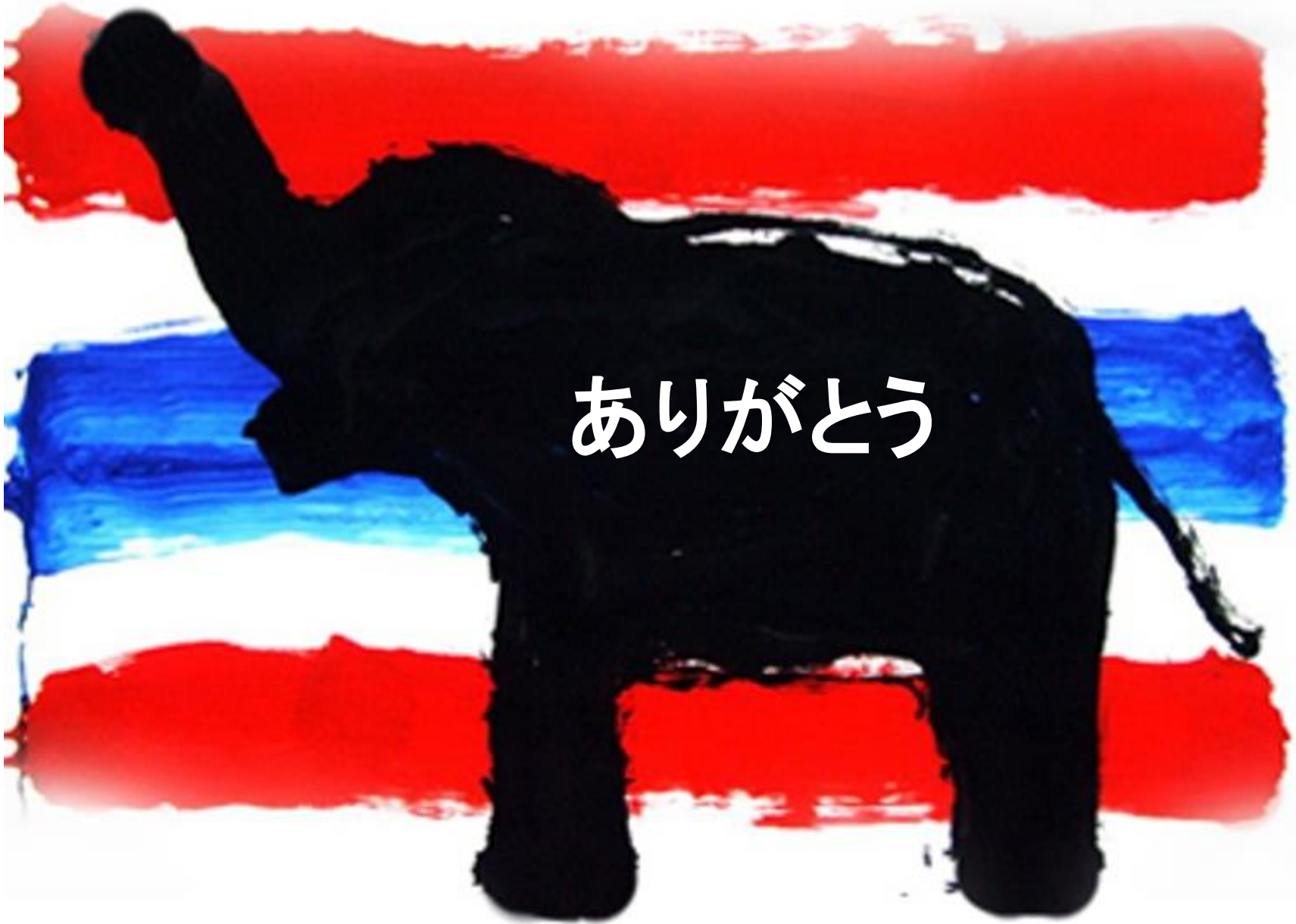
"A person has the right to make a statement of intent not to seek health services that are just to prolong the death of his or her last moments of life or to end suffering from illness"

No.

**Strong body must move,
Strong spirit must be calm**
phuthṭh ṭhātu phikhu



 **Medical Association of Thailand**



ありがとう

 **Medical Association of Thailand**