



Medical Assistance In Dying

**Gary Chaimowitz, MB ChB, FRCPC, DFCPA¹; Alison Freeland, MD, FRCPC, FCPA²;
Grainne E. Neilson, MD, MRCPsych, FRCPC, LLM³;
Nickie Mathew, MD, ABPN (Addiction Psychiatry), FRCPC, ABPM (Addiction Medicine)⁴;
Raj Rasasingham, MD, FRCPC, DABPN⁵; Natasha Snelgrove, MD, FRCPC⁶; Melanie Wong, MD⁷**

A position statement developed by the Canadian Psychiatric Association's Professional Standards and Practice Committee, and approved by the Board of Directors on February 10, 2020.

Canada has passed legislation to shape medical assistance in dying (MAiD) for people with irremediable medical conditions who are in a state of irreversible decline, and whose death is in the foreseeable future.¹ This development was in response to society's changing view of MAiD as reflected in a landmark Supreme Court decision² on this topic. A subsequent Quebec Superior Court decision struck down the "reasonably foreseeable" provision in Canada's assisted dying law.³

The Canadian Psychiatric Association (CPA) did and does not take a position on the legality or morality of

MAiD as this is a decision reflecting current Canadian ethical, cultural and moral views.

However, with the legislation now enacted and being tested in courts, the CPA maintains several important principles and considerations regarding MAiD and psychiatry in Canada. We maintain these principles and considerations even as the legislation and case law evolves.

Canadian psychiatrists will ensure that:

1. They have a working knowledge of legislation that will potentially impact their patients with respect

¹ Head of Service, Forensic Psychiatry, St. Joseph's Healthcare, Hamilton, Ontario; Professor, Department of Psychiatry and Behavioural Neurosciences, McMaster University, Hamilton, Ontario.

² Vice-President, Quality, Education and Patient Relations, Trillium Health Partners, Mississauga, Ontario; Associate Dean, Medical Education (Regional), Faculty of Medicine, University of Toronto, Toronto, Ontario; Associate Professor, Department of Psychiatry, University of Toronto, Toronto, Ontario.

³ Staff Forensic Psychiatrist, East Coast Forensic Hospital, Dartmouth, Nova Scotia; Assistant Professor, Department of Psychiatry, Dalhousie University, Halifax, Nova Scotia.

⁴ Clinical Assistant Professor, Department of Psychiatry, University of British Columbia, Vancouver, British Columbia; Medical Director, Complex Concurrent Disorders, BC Mental Health Substance Use Services, Burnaby, British Columbia.

⁵ Director, Continuing Professional and Practice Development, Department of Psychiatry, University of Toronto, Toronto, Ontario; Director, Postgraduate Education, Psychiatry, Humber River Hospital, Toronto, Ontario; Clinical Head and Physician Leader, Child and Adolescent Outpatients, Humber River Hospital, Toronto, Ontario.

⁶ Assistant Professor, Department of Psychiatry and Behavioural Neurosciences, McMaster University, Hamilton, Ontario.

⁷ Resident, Department of Psychiatry, Memorial University, St John's, Newfoundland and Labrador.

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Note: It is the policy of the Canadian Psychiatric Association to review each position paper, policy statement and clinical practice guideline every five years after publication or last review. Any such document that has been published more than five years ago and does not explicitly state it has been reviewed and retained as an official document of the CPA, either with revisions or as originally published, should be considered as a historical reference document only.

to MAiD, and shall take it into consideration during clinical encounters where this issue may arise.

2. Patients with a psychiatric illness should not be discriminated against solely on the basis of their disability, and should have available the same options regarding MAiD as available to all patients.
3. Psychiatrists will be mindful of the medical ethical principles as they relate to MAiD. They should not allow personal opinion or bias to sway patients who wish to consider MAiD as an option for addressing irremediable conditions.
4. While psychiatrists may choose not to be involved with the provision of MAiD, patients requesting MAiD must be provided with information regarding available MAiD resources and the referral process.
5. Psychiatrists who assess eligibility for MAiD are expected to be rigorous in conducting capacity assessments and identifying symptoms of mental disorder that are likely to affect decision-making.

The CPA will continue to protect the rights and interests of patients with psychiatric conditions at all times, and with particular attention to the issues of decisional capacity, informed consent and irremediable conditions in the legislation and evolving landscape of MAiD. The CPA will advocate for the inclusion of appropriate safeguards in processes, protocols, procedures and legislation pertaining to provision of MAiD.

References

1. Parliament of Canada. An act to amend the criminal code and to make related amendments to other acts (medical assistance in dying) [Internet]. Canada; 2016. [Cited 2020 Feb 03]. Available from: <http://www.parl.gc.ca/HousePublications/Publication.aspx?Language=E&Mode=1&DocId=8384014>.
2. Carter v. Canada 2015 SCC 5 [2015] 1. R.C.S. 331.
3. Truchon c. Procureur général du Canada, 2019, QCCS 3792.