

Involvement of palliative care in euthanasia practice: Authors' reply to Regnard and Proffitt

Dierickx, Sigrid; Deliens, Luc; Cohen, Joachim; Chambaere, Kenneth

Published in:
Palliative Medicine

DOI:
[10.1177/0269216318809581](https://doi.org/10.1177/0269216318809581)

Publication date:
2019

Document Version:
Final published version

[Link to publication](#)

Citation for published version (APA):

Dierickx, S., Deliens, L., Cohen, J., & Chambaere, K. (2019). Involvement of palliative care in euthanasia practice: Authors' reply to Regnard and Proffitt. *Palliative Medicine*, 33(1), 117-117.
<https://doi.org/10.1177/0269216318809581>

General rights

Copyright and moral rights for the publications made accessible in the public portal are retained by the authors and/or other copyright owners and it is a condition of accessing publications that users recognise and abide by the legal requirements associated with these rights.

- Users may download and print one copy of any publication from the public portal for the purpose of private study or research.
- You may not further distribute the material or use it for any profit-making activity or commercial gain
- You may freely distribute the URL identifying the publication in the public portal

Take down policy

If you believe that this document breaches copyright please contact us providing details, and we will remove access to the work immediately and investigate your claim.

Involvement of palliative care in euthanasia practice: Authors' reply to Regnard and Proffitt

We thank Regnard and Proffitt for their interest in our article. The authors mainly invoke methodological issues to question our study results. As we acknowledge in the original article, survey research is always subject to certain validity issues. However, this is an insufficient reason to claim that we used such a vague definition that in the majority of cases physicians do not even know whether what happened was in fact euthanasia. First, euthanasia was defined in the questionnaire in accordance with its definition in the Belgian law on euthanasia. Second, also when the physician self-labeled the act as euthanasia, palliative care services were involved in 69% of cases. They also make the unfair claim that we purposely ignored our own data that 86% of those who received palliative care did not request euthanasia. This is beside the point, as it would also not make sense to state that 95% of those who did not receive palliative care did not request euthanasia. We also point to a logical fallacy in the authors' response because even if our data would underestimate palliative care service use, the data still clearly show an involvement of palliative care services in euthanasia practice, including multidisciplinary hospital-based palliative care teams and home-based palliative care teams.

Our study used a conceptual framework and rigorous method¹ that has been repeatedly applied in population-based studies on end-of-life decision-making in several countries. This method allows us to make a reliable estimation of the frequency of euthanasia. It is also the first large-scale study on the subject of palliative care involvement in euthanasia practice. More thorough investigation is needed into why and how palliative care professionals are involved in euthanasia practice. However, it is undeniable from the data that in Flemish palliative care practice, a substantive compatibility is present between euthanasia, on one hand, and palliative care, on the other, in the sense that at least

certain palliative care professionals are deeply and to a large extent involved in euthanasia decision-making procedures and performance. This compatibility in practice points to a moral compatibility of palliative care and euthanasia in the minds of Flemish palliative care professionals, and this is reflected in the position of the Flemish Federation for Palliative Care of euthanasia being embedded in palliative care.²

Declaration of conflicting interests

The author(s) declared no potential conflicts of interest with respect to the research, authorship, and/or publication of this article.

Funding

The author(s) received no financial support for the research, authorship and/or publication of this article.

ORCID iD

Sigrid Dierickx  <https://orcid.org/0000-0002-6392-2681>

References

1. Chambaere K, Bilsen J, Cohen J, et al. A post-mortem survey on end-of-life decisions using a representative sample of death certificates in Flanders, Belgium: research protocol. *BMC Pub Health* 2008; 8(1): 299.
2. Vanden Berghe P, Mullie A, Desmet M, et al. Assisted dying—the current situation in Flanders: euthanasia embedded in palliative care. *Eur J Palliat Care* 2013; 20(6): 266–272.

Sigrid Dierickx^{1,2} , Luc Deliens^{1,2}, Joachim Cohen¹ and Kenneth Chambaere^{1,2}

¹End-of-Life Care Research Group, Vrije Universiteit Brussel & Ghent University, Brussels, Belgium

²Department of Public Health and Primary Care, Ghent University, Ghent, Belgium

Corresponding author:

Sigrid Dierickx, Department of Family Medicine and Chronic Care, Vrije Universiteit Brussel, Brussels, Belgium. Email: sigrid.dierickx@vub.ac.be