After the car that he is driving at high speed hits a telephone pole, Mr. D is brought to the hospital emergency room in serious condition. The physicians who examine him recommend surgery to repair a major internal hemorrhage. But the 68 year old Mr. D refuses. The physicians learn that three weeks earlier Mr. D was diagnosed as having a carcinoma of the tongue. He has refuse surgery for the lesion and has asked his own physician not to tell his wife that he has a fatal disease.

The hospital physicians believe that Mr. D. will die without surgery, and they call a psychiatric resident to evaluate Mr. D. The psychiatric resident finds Mr. D coherent, rational, and alert. Mr. D tells the resident that he has had a good professional life as an engineer, and a good personal life with his wife and two children but that he believes is life is now almost over. The resident suggests, and Mr. D does not deny, that the automobile accident was a deliberate suicide attempt.

Should the psychiatric resident recommend that Mr. D's refusal to accept surgical treatment be honored, or that a court order be sought so that surgery can be performed on Mr. D? In either case state your reasons.

ANSWER: In general a refusal to accept treatment is not suicide, since the patient does not set into operation the chain of causes leading to his death. In this case, however, it appear that the patient produced the injury for which surgery is contemplated. In light of this fact the physician should seek a court order for surgery. Although patient autonomy is an important value, Mr. D sacrificed his autonomy by placing his own life in jeopardy.

From Hastings Center Report, Case 25.

Intercollegiate Ethics Bowl, 1994

© Robert Ladenson, Illinois Institute of Technology, 1994