**Ethical perspectives regarding End Of Life decisions among doctors belonging to Allopathic medicine and Ayurvedic medicine in India.**

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**Abstract:**

Advances in the field of medicine have enabled the health professionals to have more control over the process of life and death, creating ethical dilemmas. In India, end-of-life decisions are influenced by the position they occupy along various dimensions, such as social class, religion, caste, community, language, gender to name a few. However, the views of doctors related to end of life decisions could also be different among doctors practicing allopathic medicine and ayurvedic medicine. Ayurveda is a system of medicine in India which considers the body, mind, senses and soul as one. Hence an attempt is made here to assess the attitudes of doctors in allopathic and ayurvedic medicine regarding the end of life decisions. A cross-sectional survey among 215 doctors working at two tertiary care hospitals was conducted to determine their attitudes towards end of life decisions. A closed ended questionnaire was developed. The questionnaire was tested for content validity. Ethical clearance was obtained from the IEC. The questionnaire was used to collect data on gender, age, area of their discipline and their attitudes on end of life decisions. Majority of the respondents were males (60.1%). Out of 215 doctors 120 were practicing Ayurvedic system of Medicine. 65.26 % of the doctors practicing Allopathic medicine agreed that they should comply with the patient’s request to withhold or withdraw life sustaining treatment. 55.78% of the Allopathic doctors felt that relatives could take decisions of end of life care. Regarding euthanasia 94.16% of the doctors practicing Auyrvedic medicine were against it. 22.10% and 77.5% of the allopathic and ayurvedic doctors felt that the use of lethal drugs at the patient’s explicit request will harm the patient-doctor relationship. Ayurvedic doctors are against euthanasia however allopathic doctors supported euthanasia for the relief of pain and suffering.

**Key words**: Euthanasia, Terminal Care, Medicine, Ayurvedic, Attitude

**Introduction:**

Advances in the field of medicine have enabled the health professionals to have more control over the process of life and death, creating ethical dilemmas. In India, End of life deals with good and bad death.(1) End-of-life decisions are influenced by the position they occupy along various dimensions, such as social class, religion, caste, community, language, gender to name a few. However, the views of doctors related to end of life decisions could also be different among doctors practicing allopathic medicine and ayurvedic medicine. Ayurveda is a system of medicine in India which considers the body, mind, sense and soul as one. However there is generally a ‘paternalistic’ approach prevailing in most of the tertiary care hospitals. (2) Hence an attempt is made here to assess the attitudes of doctors in allopathic and ayurvedic medicine regarding the end of life decisions.

**Methodology:**

A cross-sectional study was conducted in two tertiary care hospitals, providing allopathic and ayurvedic treatment at Mangalore, India. The data was collected from allopathic and ayurvedic doctors and a convenience sampling method was adopted, with 120 in allopathic group and 95 in ayurvedic group. All doctors who gave the informed consent were involved in the study. Ethical clearance was obtained from the Institutional Ethical Committee. The principal researcher explained the study to the study participants and was on-site to clarify any questions. The study was conducted using a questionnaire having 12 questions which was closed ended. This was adapted from a previous study.(3) It was later tested for content validity by giving it to subject experts. The tool collected data on gender, area of discipline and their attitude on End-of-life decisions. The questionnaire was anonymized and the participants were assured of confidentiality. Data was analysed using IBM SPSS statistical version 17.0. Descriptive statistics were used to analyse and present the quantitative data.

**Results:**

A total of 215 questionnaires were distributed to the health professionals. Among them 120 were from the discipline of Ayurveda and 95 were from the discipline of allopathy.

Table 1 shows that of the 215 health professionals 94.7% of the allopathic doctors felt that they should comply with the patient’s request to withhold or withdraw life sustaining treatment. In addition 85.3% of them felt that if the patient is not competent, relatives should decide regarding end of life care.

As to the discussion with the patient regarding use of life shortening drugs to alleviate pain and suffering, 85.3% of allopathic doctors agreed to the concept. On the other hand, 70.8% of the ayurvedic doctors disagreed that a patient should have the right to decide whether or not to hasten the end of her life.

It was interesting to note that 76.7% of the ayurvedic doctors aimed at preserving the life of the patients, even if patients requested to hasten the end of their lives. Surprisingly, 9.8% of the allopathic doctors and 33.3. % of the ayurvedic doctors disagreed that advanced directive should be respected even if it hasten the end of patient’s life. In the opposite, 68.4% of the allopathic doctors and 23.3% of the ayurvedic doctors agreed that euthanasia is more humane to end life than prolonging suffering.

**Discussion:**

In India, while taking decisions for End of life, four ethical principles must be followed: a) Autonomy - the patient has the right to choose the manner of his treatment, b) Beneficence – it is acting in the best interest of the patient, c) Non maleficence - it impose no unnecessary or unacceptable burden upon the patient, d) Distributive justice – doctors need to take a responsible decision and to make good use of the infrastructure, finance and human resources.(4)The other factors like socio cultural norms, spiritual aspects, Consumer Protection Act and limited knowledge on legal issues put the Indian professionals in an ambiguous position.

The present study shows that the attitude of the allopathic doctors was to comply with the patient’s request to withhold or withdraw life sustaining treatment. And majority of them felt that the care takers or relatives should decide the issues related to end of life care.

The health professionals felt that palliative care during end of life averts request for euthanasia, however a study conducted by Cipla Palliative care institute Pune, showed that majority of the patients preferred to die at home as this is cost effective, relevant and practical. (5)

The Ministry of Health and Family welfare, along with Pallium (A palliative care centre in India) developed a national palliative care strategy which eventually formed the national program of palliative care for India. However this was implemented in only few states due to lack of budget allocation.(6)

A considerable number of ayurvedic and allopathic doctors agreed that advance directive should be respected, even if it hastens the end of patient’s life. Given in the Indian context the Supreme Court of India objected the idea of advance directive arguing that it may lead to abuse and neglect off the elderly.(7)

Studies have shown that advance directive reduces the burden of family members and medical personnel when crucial decisions need to be taken at the end of life. In the absence of advanced directives, critically ill patients are given aggressive medical treatments, which may either boost their income or their perception that they have tried all means to save the patient.(8)

Majority of the ayurvedic doctors felt that the use of lethal drugs will harm the doctor patient relationship, however good communication can help to minimize pain and suffering and enable the patients and families to experience a peaceful death. (9)

**Conclusions and Recommendations:**

In Indian philosophy the cultural customs and traditions are intricately woven where death is not considered as a final event, but more as a transition for the soul from one life to the next. However the study concludes that Ayurvedic Medicine is against euthanasia or administering lethal drugs and also feels that it spoils the Doctor-Patient relationship as compared to Allopathic Medicine.

However, upholding the right to die with dignity the Supreme Court of India on 9th March 2018, gave legal sanction to passive euthanasia and living will of persons suffering from chronic terminal disease and for individual who is reduced to a permanent vegetative state with no real chance of survival.(10) People should also be educated on advanced directives and directives like Do Not Resuscitate (DNR) so that it reduces the burden of the patient, family and the health professionals. At the end of one’s life quality matters more than the quantity of life.

**Table 1:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Questions: | Ayurvedic | | Allopathic | |
| Agree(%) | Disagree(%) | Agree(%) | Disagree(%) |
| 1. Doctors should comply with the patients request to withhold/withdraw life sustaining treatment | 34.2 | 65.8 | 94.7 | 5.3 |
| 1. If a patient is not competent, relatives should decide regarding end of life care. | 48.3 | 51.7 | 85.3 | 14.7 |
| 1. Decision to intensify the alleviation of pain or symptoms by using life shortening drugs should be discussed with the patients. | 87.5 | 12.5 | 85.3 | 14.7 |
| 1. If necessary, a terminally ill patient should receive drugs to relieve pain, even if these drugs may hasten the end of patient’s life. | 33.3 | 66.7 | 76.8 | 23.2 |
| 1. A person should have the right to decide whether or not to hasten the end of her life. | 29.2 | 70.8 | 66.3 | 32.7 |
| 1. Adequate availability of high level palliative care averts almost all requests for euthanasia or assisted suicide. | 68.3 | 31.7 | 75.8 | 24.2 |
| 1. Every person should be allowed to empower another person legally to make end of life decisions on his or her behalf in the event of incompetence. | 44.2 | 55.8 | 77.9 | 22.1 |
| 1. In all circumstances, doctors should aim at preserving the life of patients, even if patients request hastening the end of their lives. | 76.7 | 23.3 | 80 | 20 |
| 1. If a terminally ill patient is not capable of making decisions, the doctors should administer lethal drugs. | 18.3 | 81.7 | 52.6 | 47.4 |
| 1. Use of lethal drugs under patients request will harm the doctor patient relationship. | 69.2 | 30.8 | 46.3 | 53.7 |
| 1. Advance directive should be respected, even if this could hasten the end of patients life. | 66.7 | 33.3 | 90.2 | 9.8 |
| 1. Do you think euthanasia is more humane to end life than prolonging suffering? | 23.3 | 76.7 | 68.4 | 31.6 |

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