Ethical Challenges in Neurologic Rehab

Refusing Life-Sustaining Care: Liberty or Suicide?

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Course Objectives

- Understand how values drive moral decision-making and behavior
- Outline legal framework for understanding ethical principles related to the right to refuse
- Define informed consent and competency
- Differentiate between refusing medical intervention and committing suicide
- Recognize quality of life judgments made regarding individuals with disability
- Participate in a discussion of potential evaluative strategies for determining informed consent after acquiring a disability

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Have you ever had a noncompliant patient?



Is that the problem with the Dan Crews case?



What guidance do we have to help us evaluate these situations?





Law

- "Must"
- Defined by gov't
- Based on concepts of justice and equality
- Formal rules
- Public protection
- Minimum standard
- Enforced by regulatory authorities and courts

Ethics

- "Should"
- Defined by individual and community
- Based on "good" life
- Informal guidelines
- Public trust
- Ideals or aspiration
- Based on customs, professional standards

Where do ethics come from?

- Morals
 - Social conventions about right / wrong human behavior
 - Guided by values



Codes of Ethics

- Provide guidance by articulating the backbone of moral understanding that informs the profession
- Represents professional consensus
- Shared voice of the profession about responsible conduct
- Official statement of professional commitment to promote public good
- Promotes public trust

Gabard '03

Professionalism in PT: Core Values

Accountability Altruism Compassion / caring Excellence Integrity Professional duty Social responsibility

APTA '0

What are our ethical responsibilities in these cases?

- Code of Ethics, Principle:
 - 2A: PTs shall adhere to the core values of the profession and act in the best interests of the pts over the interests of the therapist
 - 2C: PTs shall provide the info necessary to allow pts to make informed decisions about PT care
 - 2D: Pts shall collaborate with pts to empower them in decisions about their health care

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Do patients have the right to refuse?

- Principle of Autonomy:
 - "Every human being of adult years and sound mind has a right to determine what shall be done with his own body"
 - Justice Cardozo in *Schloendorf* (1914)
 - Includes
 - Positive right of ensuring access to something
 Negative right of not being interfered with

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Are there any limits on what a patient can refuse?



When does patient autonomy create a conflict for us?

- When what they want isn't in their best interest
- Beneficence: what is best for each person is what should be done – provide a benefit
 - Positive obligation to do that which is good
 - Negative obligation to do no harm (nonmaleficence)
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What are our ethical obligations in providing a benefit?

- Principle 2A: PTs shall adhere to the core values of the profession and act in the best interests of the pts over the interests of the therapist
- Principle 3A: PTs shall demonstrate independent judgment in the pt's best interest in all settings

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Who gets to decide what is in the pt's best interest?

- The pt themselves, if they are autonomous
 - Based on the PATIENT's values
- What if they are unable to decide for themselves?
 - Previously competent but now not
 Advanced directive
 - Previously stated wishes
 - Never competent

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1975 Karen Ann Quinlan

- 21 yo consumed alcohol and Valium
 - became comatose
 - diagnosed as in I
- Parents wanted ventilator
- MDs refused
- Courts granted
 - 1st "Right to Die" cas
 - Substituted judgment
- She lived 10 more years

Quill '05, Fine '05

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1983 Nancy Cruzan

- 25 yo in auto accident
- Initially PNB; resuscitated
- Eventually breathing on her own
 - 1989 Parents wanter feeding tube to be removed
- MDs refused
- US Supreme Court: parents can direct care
- "Clear and convincing evidence"

Quill '05, Fine `0



1990 Terri Schiavo

- 27 yo anoxic brain injury
- Many physicians provided clear and convincing evidence of PVS with no hope of recovery
- Parents refused to believe1998 Husband wanted
- feeding tube removed
 Substituted judgment or best interest standard
- Case heard in court > 20x
- 2005 tube permanently removed





Advanced directives

- Given statutory recognition
- Respected in the eventuality that one loses one's decision-making capacity
- Includes living wills, durable powers of attorney
- Following ADs respects the autonomy, individuality, and self-determination of patients

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Advanced directives

- Seldom address the exact decision at hand
- Statements may be very general or vague
- Often have been made with implicit assumptions about their status or prognosis
- Some people change their minds
 - 15-20% of people change their mind about lifesustaining rx over the course of their illness
- They may not have been informed

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Informed Consent

- Based on principle of autonomy
- Elements
 - Disclosure (prognosis, risk / benefit)
 - Cognition (understanding, appreciation)
 - Consent / refusal / choice
- Conditions
 - Freedom from controlling influences
 - Competence / decision-making capacity

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Freedom from controlling influence

- Persuasion: convinced through reasoning
- Manipulation: getting someone to do something (for reasons you keep secret), which they would never do if they knew what your reasons were
- Coercion: intentional use of credible and severe form of threat to control another

In the matter of Baby M, 537 A2d 1227 (NJ 1988)

- Payment to be the surrogate and biological mother for a baby that is given up to the biological father at birth
- Contract was considered to be invalid
 - Use of money = coercion
 - Irrevocable agreement to give up child before birth (even before conception) is unenforceable in private placement adoption
 - Agreement to surrender baby occurs only after birth and only after the birth mother has been
 - counseled © T Stoeckmann for 2017 NPTPFE

Competency

- Evidence a choice
- "Reasonable" outcome of choice
- Choice based on "rational" reasons
- Ability to understand
- Actual understanding

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West '91

Decisional capacity

- Preferred term indicating that such capacity will vary across decisions and over time
- Seems to support the notion that people change their minds and this is acceptable to some degree
- Stable commitment is also a strong factor

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West '91

President's Commission for the Study of Ethical Problems in Medicine and Biomedical and Behavioral Research

- Definition of decision-making capacity
 - Possession of a set of values and goals
 - Ability to communicate and to understand information
 - Ability to reason and deliberate about one's choices

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West '91

Assessment of decision-making capacity

- Pt makes and communicates a choice
- Pt appreciates the situation, prognosis, nature of rx, alternatives, risk / benefit, consequences
- Pt's decision is stable over time
- Decisions are consistent with pt goals and values
- Decisions should not result from delusions
- Decisions should be rational

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Are we always rational?



Dax (1973)

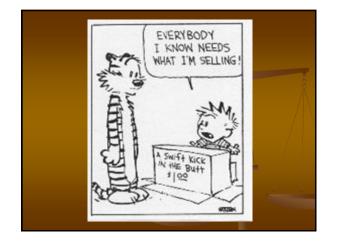
- Donald Cowart was critically injured in an oil tank explosion
 - sustained severe 2° & 3° burns over 68% of his body
 - blind and disfigured
- Despite repeated demands to stop treatment, and being declared competent, the medical team forced him to endure painful procedures and surgeries for more than a year

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when accommodation and acceptance is needed to "come to grips" with the reality of one's impairments • Caplan '88



<u>Bouvia v. Superior Court</u>, 179 Cal.App.3d 1127, 225 Cal.Rptr.297 (1986)

- 28 yo female with CP and severe arthritis wanted her feeding tube removed
- Completely dependent, with constant pain and lack of social support prevented her from living outside the hospital
- Court upheld her right to refuse medical rx - not limited to terminal cases

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Suicide

- The State has an interest in
 - Preserving life
 - Protection of the interests of innocent 3rd parties
 - Prevention of suicide
 - Maintenance of the ethical integrity of the medical profession
- Some have argued that these countervailing interests could overcome a patient's choice

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- All states have abrogated laws making suicide a crime, but most prohibit assisting a suicide
 - California Penal Code Section 401. Suicide; aiding, advising or encouraging
 - "Every person who deliberately aids, or advises, or encourages another to commit suicide, is guilty of a felony."



AMA Council on Ethical and Judicial Affairs

"Withholding or Withdrawing Life Prolonging Medical Treatment"

- Declares that the social commitment of the physician is to sustain life and relieve suffering
- Where the performance of one duty conflicts with the other, the choice of the patient should prevail

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- AMA Ethics and Health Policy H140.952
 - Physician assisted suicide is fundamentally inconsistent with the physician's professional role.
- AMA Ethics and Health Policy H140.966
 - The principle of patient autonomy requires that physicians must respect the decision to forgo life-sustaining treatment of a patient who possesses decision-making capacity. Lifesustaining treatment is any medical treatment that serves to prolong life without reversing the underlying medical condition.

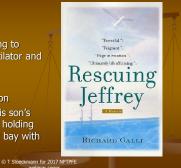
Right to refuse medical intervention: <u>Bottom Line</u>

- Supported by the courts, regardless of State interests or the ultimate outcome
- One has a right to exercise free choice
 - Includes freedom from unwanted interventions
 - It is a constitutionally protected right
 - Liberty interest of the 14" Amendment
- Removing life support not considered suicide in most living will legislation

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Parent deciding for child

- Jeffrey Galli
 - 17 yo C1-2 fx
 Father was going to disconnect ventilator and not tell him
- Rudy Linares
 - 15 month old son
 - Disconnected his son's ventilator while holding hospital staff at bay with a gun





Pro





Paul Tobin – president of Nat'l Spinal Cord Injury Assoc

"He would never walk or hold his baby. He might live the rest of his life in a rehabilitation hospital, relying on a machine to help him breathe. He'd never return to those outdoor activities that gave him such peace."



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Acquired Disability Newly injured (disabled) = grey zone Past irrevocably gone, future hard to imagine Sense of self fragmented by the loss of their identity-defining roles and characteristics Kirschner '06 Incongruence between desired personal identity and assigned social identity © T Stoeckmann for 2017 NPTPFE webinar ceries

Disability = limitations?

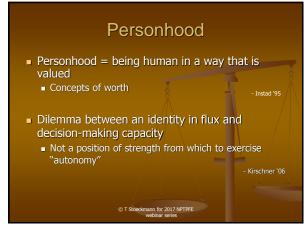












How is truly "informed" consent ultimately determined?

- May not be possible initially after an acute disabling injury; true informed consent can only occur after understanding the potential for long term rehab
- The sooner a person can regain control over as many variables of their lives as possible, the faster this capacity will return.

