

## **Autonomy in Healthcare Case**

Apothecaries 2023.

A 93 year old woman (Mrs P) is admitted to hospital with acute liver failure having taken an overdose of paracetamol & codeine over three days. She was found by a neighbour who had been called by Mrs P's worried daughter (who lives abroad). Mrs P had made extensive preparations for her suicide. According to her family, for 50 years she had expressed her intention to end her life when she became less independent. Up till now she had lived an independent & active life. A month before she had signed an AD stating that she did not wish to receive any life saving or prolonging treatment.

After she had been treated and recovered from her acute illness, the psychiatry team assessed her. She had no mood disorder & no symptoms of depression. She had mild cognitive impairment (MoCA score) but was lucid & articulate and her short-term memory reasonably intact.

She expressed no regrets regarding her decision, apart from causing distress & bother to others. She felt proud of her lifetime achievements but felt that it was the 'right time to go'. She is now refusing further treatment & is asking to be discharged.

### **Questions:**

1. Does Mrs P have capacity to refuse treatment?
2. Is the advance directive valid? Mrs P had not refused to have antibiotics for a UTI (when she became temporarily delirious).
3. Is it ethical to discharge the patient? She says she would be 'happy to die in her sleep', but for the time being will not attempt suicide again.
4. Can suicide ever be rational?