

Canada's largest hospital reports on year of medically assisted dying

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Today, in the *New England Journal of Medicine*, the team from University Health Network in Toronto that developed the organization's protocol for medical assistance in dying (MAiD) describes UHN's approach and experience. This comes a year after Canada decriminalized medically assisted dying throughout the country.

The article, *Medical Assistance in Dying - Implementing a Hospital-Based Program in Canada*, is available online ([DOI: 10.1056/NEJMms1700606](https://doi.org/10.1056/NEJMms1700606)).

Author Dr. Madeline Li, a psychiatrist in the Department of Supportive Care, UHN, writes that in Canada the legal responsibility to implement MAiD required creating an institutional framework for patient assessment and provision of service, as well as a plan for educating staff about engaging in conversations with [patients](#).

At UHN, a three-team MAiD model was adopted comprising clinical, assessment and intervention teams. Death is by injection of intravenous drugs in the hospital. A multidisciplinary quality committee provides oversight, reports metrics annually to the medical advisory committee, and stewards data for use in quality assessment and research.

In the first year of reporting (March 8, 2016 to March 8, 2017), at UHN there were 74 MAiD inquiries, 74 per cent of which were for patients whose primary diagnosis was cancer. Twenty-nine proceeded to assessment; 25 were approved, and 19 received MAiD.

Dr. Li writes: "Just prior to delivery of MAiD, all patients who reached this stage were evaluated by intervention-team physicians to determine whether they currently met criteria for informed consent for MAiD."

Amid the many checks and balances described in detail, Dr. Li concludes: "Just as advocacy from

outside mainstream medicine brought palliative care 'from the margins to the centre', so has it brought MAiD into the mainstream of medicine. It is now clear that MAiD education must be included in undergraduate medical education curricula in Canada, and in the training for a variety of specialties including general medicine, family [medicine](#), oncology, neurology, respirology, [palliative care](#), pharmacy, psychiatry, social work, spiritual care, and bioethics."

More information: *New England Journal of Medicine* (2017). [DOI: 10.1056/NEJMms1700606](https://doi.org/10.1056/NEJMms1700606)

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