Turning off heart devices near life's end stirs ethical, legal debates

A survey shows that nearly all physicians approve of turning off a defibrillator, but nearly a third say withdrawing a pacemaker amounts to assisted suicide.

By KEVIN B. O'REILLY — Posted Nov. 24, 2010

Many physicians believe that deactivating heart devices is a form of physician-aided death, according to a survey published in the November Mayo Clinic Proceedings.

"Almost one-third of medical professionals surveyed considered withdrawal of a pacemaker in a pacemaker-dependent patient as physician-assisted suicide or euthanasia, but only a very small percentage believed the same about an ICD," said Samuel J. Asirvatham, MD, the study's lead author and an electrophysiologist at the Mayo Clinic in Minnesota.

Those views are in stark contrast with the recommendations of an expert panel released in May by the Heart Rhythm Society, which represents more than 5,100 physicians specializing in cardiac pacing and cardiac electrophysiology. The organization said it is legal and ethical to honor a patient's request to turn off the pacing function even when the patient is reliant on the pacemaker.

"Deactivation is neither physician-assisted suicide nor euthanasia," the society's statement said. "The clinician's intent is to discontinue the unwanted treatment and allow the patient to die naturally of the underlying disease -- not to terminate the patient's life."

Researchers surveyed 339 doctors and other health professionals who belonged to the society in 2008 and 2009. They also surveyed patients and legal professionals.

Only 12% of lawyers thought turning off a pacemaker amounted to physician-assisted suicide, compared with 24% of patients. One in 10 doctors thought deactivating a defibrillator was akin to assisted suicide, said the study (link).

Given the range of opinions on this delicate issue, Dr. Asirvatham said doctors should take the initiative in talking with patients about the withdrawal decisions they may face.

"Education and discussion of managing devices at the end of life are important when making end-of-life decisions to better understand patients' perceptions and expectations," he said.