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## JMC Graduates and Legalization of Physician-Assisted Suicide

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## JMC Graduates and Legalization of Physician-Assisted Suicide

Physician-assisted suicide (PAS), providing a competent patient with a prescription that the patient intends to use to end his or her own life, is controversial among both physicians and patients. A recent survey of Jefferson graduates (classes of 1987-1992) conducted by the Center for Research in Medical Education and Healthcare may provide insight as to why physicians differ so strongly in their opinions about PAS.

Results of the survey, presented at a Research in Medical Education plenary session of the AAMC's 51st annual meeting in Chicago, showed that Jefferson graduates are strongly divided in their opinions about whether PAS should be legalized. Of the 835 physicians who returned the survey (66% response rate), 41% were opposed to the legalization of PAS, 34% favored legalization of PAS, and 25% had no opinion. Opinion was unrelated to age or gender, but was associated with physician specialty. Internal medicine subspecialists, emergency physicians, and primary care physicians had the lowest rates of endorsement of PAS legalization, whereas orthopedic surgeons, psychiatrists, and physicians in hospital-based specialties (radiology, pathology, and anesthesiology) were most likely to favor legalization of PAS.

Physician opinion about legalizing PAS was also associated with opinions towards other contemporary health care issues. Physicians who favored legalizing PAS were also likely to favor physician unionization and government regulation of health care policy. They were more likely to agree that HMO physicians ordered fewer tests and were not as dedicated to their patients as private practice physicians. Physicians' views on the cost and rationing of medical care were not associated with views about legalizing PAS. Other studies have shown that physicians are likely to oppose PAS for moral, religious, or ethical reasons, and that opinion may change as a result of exposure to requests from dying patients.

Thus, physician-assisted suicide is a topic to which physicians bring a multitude of perspectives: professional experience, personal code, and views about the structure and administration of the health care system. In contrast to the controversial area of physician-assisted suicide, nearly all Jefferson graduates surveyed strongly supported the notion that compassionate care at the end of life was an important aspect of medical training and practice.

Prior studies have shown that legalization of PAS would influence physicians' decisions about whether or not to participate in PAS. A more comprehensive understanding of the factors that influence physicians' opinions and behaviors regarding PAS is important to health policies surrounding this issue.

## About the Author

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