Advance Care Planning and End-of-Life Decisions

What Catholics Need to Know

Thinking about death and dying, or what kind of medical care you want when you are too ill to communicate your wishes, are not comfortable subjects for many. Katarina Lee, clinical ethicist at St. Boniface Hospital, will be giving a workshop on the topic on March 2 (1). She offers Catholics some helpful information about the benefits and pitfalls regarding advance care planning and end-of-life decisions.



Katarina Lee is Manitoba born, and was raised just outside of Carman. A devout Catholic, she became interested in questions surrounding medical care at age 12, when her grandmother was hospitalised for 19 months. Those questions led her to study philosophy, law and bioethics. She is the clinical ethicist at St. Boniface Hospital and an assistant professor in Family Medicine at the University of Manitoba.

Who should think about end-of-life decisions and advance care planning?

Everyone. Certainly anyone above the age of 18. Technically, under Manitoba legislation, anyone 16 years or older can make decisions for themselves, if they have the capacity to do so. The trouble is that too many people say to themselves *Oh, I'll think about this later in life. I'll tackle advance care planning when I update my will.*

The expectation is that this is only a concern for older people. Of course, the reality is that hospitals have many twentysomethings who are dying and are incapacitated. They can't make decisions. And unfortunately, they haven't prepared for that eventuality.

How do you make decisions if you're incapacitated, then?

The only legal avenue in Manitoba is to designate a health care proxy. That's someone you direct to make health care decisions for you when you are incapacitated. Designating a health care proxy is a relatively easy process. You can simply fill a Manitoba proxy form. The bigger challenge is preparing the medical directives that help your proxy make the proper decisions. That's what advance care planning is all about.

It's important then to choose a good proxy...

Absolutely. It's essential, even. A proxy should be someone you know well and have a solid, personal relationship with. It's also important that you've engaged in a conversation, preferably several conversations, about your wishes and that you've clearly expressed your philosophical and religious beliefs. Because advance care directives have pitfalls. You can't account for every circumstance. Your proxy must decide *for you*. If he or she knows your wishes well, it helps the decision-making process.

So what does a Catholic need to think about in preparing advance care directives?

As Catholics, we're called to preserve life from conception to natural death. That's the quiding principle.

When one is incapacitated, one can preserve life by using ordinary or extraordinary means. Take a cancer patient. Ordinary means would be to make the patient comfortable as possible, and to give him or her treatments that heal and allow quality of

life. This usually means proper nutrition, hydration, antibiotics and less aggressive treatments.

There are gray areas. An aggressive chemotherapy could be argued to be extraordinary means. So could high doses of aggressive antibiotics.

Are extraordinary means to be discouraged?

No. Extraordinary means can sometimes save a patient. Say our cancer patient opts for aggressive chemotherapy. The treatment could lead to a full recovery. Then again, if the cancer is so advanced that the only thing aggressive chemotherapy will realistically do is extend life for a brief time, with little quality of life, would that be truly beneficial? What would we be really doing, preserving life or extending it to the fullest extent possible, simply for the sake of extending it?

Though they can be beneficial, there is no obligation to receive extraordinary means. A valid choice for a Catholic in this scenario might simply be to opt for good palliative care, followed by a natural death if the disease progresses.

It's clear that every case is unique...

Yes. Even ordinary means like hydration and nutrition can, in some circumstances, become more harmful than beneficial. In some cases, nutrition can cause distention of the stomach, and cause fluid overload. A lower amount of food or stop/start nutrition can be helpful and more comforting.

With all these gray areas, what's the most important thing to do when preparing advance care directives?

Above all, say who you are. Christ calls us to declare our faith. We recite the creed on Sundays. This is really no different. We are called to follow Jesus, who is the source of life itself. In your advance care directive, state confidently that you are a practicing

Catholic, and that you believe life begins with conception and ends with natural death. And because of the culture we're now in, state clearly that you are not seeking medical assistance in dying (MAID), and that it isn't an option. Specify that MAID doesn't fit in your philosophical and theological views. Indicate that you want solid palliative care, if and when it's needed.

There are resources to help you. The Catholic Health Association of Saskatchewan has an **excellent booklet** to guide you in writing your directives and choosing a proxy.

And make sure your proxy and your family and friends know where to find your advance care directives. In an emergency, they need to know exactly where it is.

(1) The Marriage, Family and Life Service of the Archdiocese of Saint-Boniface is pleased to offer a Free Advance Care planning, End-of-Life Decisions & MAID workshop, Saturday, March 2, 2019, from 9:30 AM – 11:30 AM in the Saint Boniface Cathedral Hall. Presented by Katarina Lee, this workshop will provide education, benefits and pitfalls regarding advance care planning, including the use of advance care directives and health care proxies. Discussions from a Catholic perspective of medical decisions such as nutrition, hydration, resuscitation and ventilation will also be explored, as well as, palliative care and an overview of Medical Aid in Dying and the impact recent legislation has had on society and the practice of medicine. Space is limited, please register online at: bit.ly/careplanning1

For more information: <u>mfl2@archsaintboniface.ca</u> or 204-594-0295. To view the poster, *click here*.