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A conference of the Medical Ethics Alliance entitled “Natural Death - is a pathway needed”, on the 18th June at the Royal Society of Medicine, attracted a lot of press attention because Prof. Pullicino cast doubt on the scientific possibility of knowing that death is imminent. One consequence of this has been the number of relatives who have contacted the MEA with highly distressing accounts of deaths on the Liverpool Care Pathway. Amongst the most alarming of which, has been the deaths of elderly people deprived of all fluids for up to fourteen days.

Insufficient attention has been given to a Scottish critique which states;

“A blanket policy of clinically assisted (artificial) nutrition or hydration, or no clinically assisted (artificial) hydration, is ethically indefensible and in the case of patients lacking capacity prohibited under the Adults with Incapacity (Scotland) Act 2000.1

Amongst the symptoms that the LCP lists are - pain, agitation, nausea, vomiting, and dyspnea - but not thirst, though this is one of the most distressing of all symptoms. Nor does moistening the mouth relieve it.

An open letter to NICE calling for central monitoring of complaints from relatives over the implementation of the LCP was not even acknowledged. 2 Blanket assurances that the it conforms with “gold standards” or “quality statements” will no longer suffice. It clearly does not

do so.

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References

1 Adopted version 12 - Dec. 2010, NHS Forth Valley

2 www.medethics-alliance.org 12/8/12