

Dialysis withdrawal for elderly patients: Ethical and Legislative issues

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Please cite this article as: Gharsellaoui S, et al. Dialysis withdrawal for elderly patients: Ethical and Legislative issues. Middle East Journal of Age and Ageing. 15(3):47. DOI: 10.5742MEJAA.2018.93549

ABSTRACT

Background: The population of dialysis patients is growing older. In such a situation, dialysis should not be “a life extension”.

As a result, the decision to stop dialysis poses many ethical problems, especially for patients who cannot decide for themselves.

Methods and findings: Through a review of literature, our aim is to highlight the ethical issues of stopping dialysis for elderly persons.

Results: The decision-making process in end-of-life dialysis is complex. In dialysis, the complexity lies in the fact that the boundaries between therapeutic and palliative care are often poorly defined. In addition, the use of a machine is a substitutive and non-curative technique which creates between the patient and the dialysis machine, a complex relationship of fusion.

At the end of life, the rupture of this fusional relationship is sometimes impossible for the patients, their families, but also for the care teams.

Furthermore, we resort to the rational notion of proportionality of care. This includes the search for advance directives, collegial procedures and the use of a clinical survival score.

Conclusion: The legislator intended to shift medical practices for elderly patients. The principal aim is to increase patient’s autonomy, to reject unreasonable obstinacy and to develop palliative care.