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ACCEPTED MANUSCRIPT

Refractory Schizophrenia, Attempted Suicide, and Withdrawal of Life Support: A Clinical Ethics Case Report

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ABSTRACT

Background

Withdrawal of life-support for an individual with refractory schizophrenia following attempted suicide remains controversial. Discussion regarding prognosis of mental illness and the distinction between somatic and mental illness brings out many ethical issues. This paper will examine the role and weight of severe persistent mental illness in the withdrawal of life support following attempted suicide.

Case Description

A 30-year-old gentleman with deafness and schizophrenia was admitted with multiple self-inflicted visceral stab wounds. He developed post-operative complications necessitating on-going critical care. The parties involved were as follows: the patient, his parents, the critical care trauma service, the palliative and psychiatry consult services, and the ethics committee.

Over the patient's hospital course, his parents struggled to reconcile his poor pre-injury quality of life with his ongoing need for intensive medical intervention. The primary and consulting teams were required to integrate differing perspectives on the patient's past responsiveness to treatment and the extent to which additional efforts might advance his quality of life and limit his future suffering and suicidality. The patient's surrogate decision-makers unanimously requested withdrawal of life support. An ethics committee convened to address the question of whether refractory schizophrenia can produce so poor a quality of life as to merit the withdrawal of life-sustaining measures following a suicide attempt. Consensus was achieved and life-sustaining measures were subsequently withdrawn, allowing the patient to pass away peacefully in an inpatient hospice facility.

Key Words: Suicide, Ethics, Withdrawal, Suffering, Refractory, Schizophrenia

Running Title: Refractory Schizophrenia, Refractory Suffering

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