

CHPCA and CSPCP - Joint Call to Action

Due to ongoing confusion amongst the general public regarding Hospice Palliative Care (HPC) and Medical Assistance in Dying (MAiD), the Canadian Hospice Palliative Care Association (CHPCA) and the Canadian Society of Palliative Care Physicians (CSPCP) would like to clarify the relationship of hospice palliative care and MAiD.

Healthcare articles and the general media continue to conflate and thus misrepresent these two fundamentally different practices. MAiD is not part of hospice palliative care; it is not an “extension” of palliative careⁱ nor is it one of the tools “in the palliative care basket”.ⁱⁱ National and international hospice palliative care organizations are unified in the position that MAiD is not part of the practice of hospice palliative care.^{iii iv v vi vii viii ix x}

Hospice palliative care and MAiD substantially differ in multiple areas including in philosophy, intention and approach.^{xi} Hospice palliative care focuses on improving quality of life and symptom management through holistic person-centered care for those living with life threatening conditions. Hospice palliative care sees dying as a normal part of life and helps people to live and die well. Hospice palliative care does not seek to hasten death or intentionally end life. In MAiD, however, the intention is to address suffering by ending life through the administration of a lethal dose of drugs at an eligible person’s request.

Less than 30% of Canadians have access to high quality hospice palliative care, yet more than 90% of all deaths in Canada would benefit from it.^{xii xiii} Despite this startling discrepancy, access to hospice palliative care is not considered a fundamental healthcare right for Canadians. In contrast, MAiD has been deemed a right through the Canada Health Act, even though deaths from MAiD account for less than 1.5% of all deaths in Canada.^{xiv}

We call on the federal and provincial governments to prioritize funding and improve access to hospice palliative care in Canada, and to support the implementation and action plan of the National Framework for Palliative Care in Canada.^{xv} Canadians must have a right to assistance in living with hospice palliative care, and not just a right to termination of life.

Sincerely,

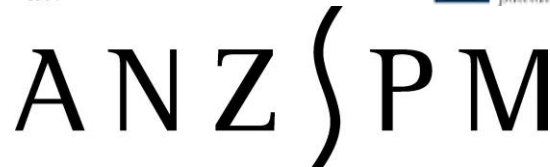


Sharon Baxter, MSW
Executive Director
Canadian Hospice Palliative Care Association
(CHPCA)
Annex D, Saint-Vincent Hospital
60 Cambridge Street, North
Ottawa, Ontario K1R 7A5
SBaxter@chpca.net



Leonie Herx MD PhD FCFP (PC)
President
Canadian Society of Palliative Care Physicians
(CSPCP)
Suite 584
1A – 12830 – 96th Avenue
Surrey, British Columbia V3V 0C2
Leonie.Herx@kingstonhsc.ca

This statement is endorsed by:



ⁱ Buchman, Dr. Sandy. “Bringing Compassion to Medicine and to the CMA.” *Canadian Medical Association*, 12 Oct. 2019, <https://www.cma.ca/dr-sandy-buchman>.

ⁱⁱ Kutcher, Dr. Matt. “Navigating MAiD on PEI.” *Canadian Medical Association*, 19 Nov. 2018, <https://www.cma.ca/dr-matt-kutcher>.

ⁱⁱⁱ World Health Organization (WHO). “WHO Definition of Palliative Care.” *World Health Organization (WHO)*, <https://www.who.int/cancer/palliative/definition/en/>.

^{iv} De Lima L, Woodruff R, et al, International Association for Hospice and Palliative Care “Position Statement Euthanasia and Physician-Assisted Suicide.” *JPM* Vol 20, 1:1 -7.

^v Radbruch, Lukas, et al. “Euthanasia and Physician-Assisted Suicide: A White Paper from the European Association for Palliative Care.” *Palliative Medicine*, vol. 30, no. 2, 2015, pp. 104–116., doi:10.1177/0269216315616524.

^{vi} Australia and New Zealand Society of Palliative Medicine (ANZSPM) “*Position Statement on the Practice of Euthanasia and Physician Assisted Suicide.*” 31 Mar. 2017

^{vii} Canadian Hospice Palliative Care Association “*Policy on Hospice Palliative Care and Medical Assistance in Dying (MAiD).*” Jun. 2019

^{viii} Canadian Society of Palliative Care Physicians “*Key Messages: Palliative Care and Medical Assistance in Dying (MAiD).*” May 2019.

^{ix} “Statement on Physician-Assisted Dying.” *American Academy of Hospice and Palliative Medicine (AAHPM)*, 24 Jul. 2016, <http://aahpm.org/positions/pad>.

^x Canadian Medical Association. “Palliative Care (Policy).” 2016

^{xi} Shariff M & Gingerich M. “Endgame: Philosophical, Clinical and Legal Distinctions between Palliative Care and Termination of Life.” Vol. 85, Second Series Supreme Court Law Review 225. 2018

^{xii} Quality End-of-Life Care Coalition of Canada and Canadian Hospice Palliative Care Association. “The Way Forward National Framework; a Roadmap for an Integrated Palliative Approach to Care.” Mar. 2015.

^{xiii} Canadian Society of Palliative Care Physicians . “How to Improve Palliative Care in Canada - A Call to Action for Federal, Provincial, Territorial, Regional and Local Decision-Makers.” Nov. 2016.

^{xiv} “Fourth Interim Report on Medical Assistance in Dying in Canada.” Government of Canada, Health Canada, Apr. 2019, <https://www.canada.ca/en/health-canada/services/publications/health-system-services/medical-assistance-dying-interim-report-april-2019.html>.

^{xv} “Framework on Palliative Care in Canada.” *Government of Canada*, Health Canada, 4 Dec. 2018, <https://www.canada.ca/en/health-canada/services/health-care-system/reports-publications/palliative-care/framework-palliative-care-canada.html>.



Canadian Hospice Palliative Care Association
Association canadienne de soins palliatifs

CSPCP
Canadian Society of
Palliative Care Physicians



SCMSP
Société canadienne des
médecins de soins palliatifs

