

## PROBLEMS WITH MENTAL COMPETENCE

Decisions to access assisted suicide require mental competence, according to proposed laws, but experience in jurisdictions where EPAS is legal suggest that it is difficult to ensure.

After reviewing the Dutch legislation, Kissane et al reported 'Demoralisation and depression emerge as pertinent clinical issues worthy of psychiatric intervention. The role of the psychiatrist is complex and includes issues of assessment, systems, countertransference and treatment. Dutch guidelines for physician-assisted suicide in the mentally ill generate serious concern given the uncertainty of prognosis, potential range and variability of outcome of treatments of suicidality and the boundary violations that are involved for the psychiatrist. The guidelines have the potential to dangerously alter the practice of psychiatry and should be condemned.'

Kissane, D. W. and B. J. Kelly (2000). "Demoralisation, depression and desire for death: problems with the Dutch guidelines for euthanasia of the mentally ill\*." Australian and New Zealand Journal of Psychiatry **34**(2): 325-333.

<http://onlinelibrary.wiley.com/doi/10.1046/j.1440-1614.2000.00692.x/full>

Psychiatric assessment was problematic during the short period that EPAS was legal in the Northern Territory. Social isolation and depression were common.

Kissane, D. W., A. Street and P. Nitschke (1998). "Seven deaths in Darwin: case studies under the Rights of the Terminally Ill Act, Northern Territory, Australia." The Lancet **352**(9134): 1097-1102.

<https://www.ncbi.nlm.nih.gov/pubmed/9798585>