

## **Overview of the submission of the Bishops' Conference of England and Wales to General Medical Council (GMC) consultation on end of life treatment and care**

The issue of withholding or withdrawing medical treatment raises difficult ethical questions. The Catholic Church has long acknowledged that treatment should be withheld if it is futile and that patients may reasonably forego treatment that is risky or overly burdensome in relation to the hoped-for benefits. The competent patient has primary responsibility for his or her own health and physicians should respect the decisions of patients to refuse risky or burdensome treatment. On the other hand the wrongful withholding of treatment could result in harm or even death to a patient. This would be a great injustice. The Church's teaching on withholding and withdrawing treatment can be found in the booklet: *The Mental Capacity Act and 'Living Wills': A practical guide for Catholics*.

In this area the Catholic Church is generally in agreement with the General Medical Council (GMC) and finds the current GMC guidance helpful for most cases. One very specific area in which the Church finds the present GMC guidance flawed is the question of withdrawing nutrition and hydration from patients who are in a 'persistent vegetative state'. Here the UK law itself is distorted due to the Bland judgement of 1993. In that case withdrawing nutrition and hydration was used as a form of passive euthanasia.

The Bland judgement led many people to worry that food and fluids might also be withheld from them, even against their wishes. This is why Leslie Burke took his case against the GMC to demand the right to be fed by tube if he needed this in the future. For legal reasons the final judgement in that case, in favour of the GMC, was probably the correct one, but the concerns of Mr Burke were real and important and the GMC guidance needed to be changed to address them.

The proposed draft guidance represents an improvement on the current GMC guidance. In particular, it is helpful in the following ways:

- in placing withholding and withdrawing decisions in the context of end-of-life care and in emphasising the need for palliative care and spiritual care
- in drawing attention to the laws against assisted suicide and mercy killing
- in saying that withholding and withdrawing decisions should never be 'motivated by a desire to bring about the patient's death'
- in recognising that nutrition and hydration is regarded by many people as basic care, even when provided by tube
- in shifting the terminology from 'artificial nutrition and hydration' to 'clinically assisted nutrition and hydration'
- in stating that doctors must always offer a patient assisted nutrition and hydration when this might help to prolong the patient's life
- in its careful guidance on how to resolve disputes over patient care in this area

While some specific criticisms remain, the primary focus of the submission of the Bishops of the Catholic Church is to welcome and acknowledge the improvements the GMC is proposing so that these will be included in the new guidance.