

Avoid Advanced Dementia with an Advance Directive for Stopping Eating and Drinking



To the Editor:

We read with great interest the recent publication by Kollisch et al¹ outlining limits of advance directives for avoiding advanced dementia. The authors identify an important dilemma. Must patients with early signs of dementia who would rather be dead than alive with advanced dementia hasten their death preemptively by willfully stopping eating and drinking? Must they act while they still have decision-making capacity and are still enjoying life? Or may these patients avoid such “premature death” by making their future wishes known through an “advance dementia directive,” counting on others to withhold food and drink on their behalf once capacity is lost?

Furthermore, suppose the patient completed a dementia directive, later lost decision-making capacity, but now appears to be enjoying eating and drinking. Should caregivers listen to the “then-self” who completed the directive or to the “now-self”? While going without food and water can usually be made comfortable, the now-self advanced dementia patient would not understand why one of the few things they enjoy is being withheld.² Therefore, perhaps other “last resort” death-hastening options should be made available to such patients.³ If you are interested in exploring in more depth the clinical, psychiatric, ethical, and legal

dimensions of these intriguing ideas, we have just completed a multi-authored book on the subject.⁴

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<https://doi.org/10.1016/j.amjmed.2021.04.025>

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Funding: None.

Conflicts of Interest: None.

Authorship: All authors took a role in writing the manuscript.

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