

Study of euthanasia trends in Belgium has lessons for other countries

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A new study on euthanasia trends in Belgium, which shows an increase in reported cases since legislation was introduced, provides lessons for countries that have legalized assisted dying. The research is published in *CMAJ (Canadian Medical Association Journal)*.

In 2002, Belgium legalized the intentional ending of life by a physician at the patient's explicit request. The government introduced safeguards to protect patients, including a multidisciplinary review panel—the Belgian Federal Control and Evaluation Committee for Euthanasia—to ensure that each procedure was performed according to legal guidelines.

The Belgian researchers found that the number of officially reported [euthanasia](#) cases in Belgium increased from 235 in 2003 to 1807 in 2013 across all age groups and in all settings (home or care facility). They also noted an increase among people with conditions other than cancer and in people over age 80, a finding that was rare in the first few years after legalization. The highest incidence was consistently found among people dying with cancer, those younger than 80 years of age and those dying at home. There were also increases in euthanasia among people without terminal disease and those with psychiatric disorders, but their numbers remain relatively small.

"These findings might suggest an increase in the number of requests from these groups as they increasingly became aware of the legal possibility to request euthanasia. These findings might also reflect a decrease in reluctance to provide euthanasia within these groups as

physicians became more experienced and the wider society became more familiar with these types of cases," writes Prof. Kenneth Chambaere, End-of-Life Care Research Group, Vrije Universiteit Brussel and Ghent University, Brussels, Belgium, with coauthors.

Palliative care specialists were also consulted increasingly in the euthanasia procedure, though this is not a legal requirement.

"The increase in euthanasia among cases with noncancer diagnoses and nonterminal diseases emphasizes the importance of thorough evaluation and monitoring of the practice, since these situations are often more complex and may include [psychiatric disorders](#) and 'tiredness of life'."

"Given differences in developments between jurisdictions and even within Belgium, it is clear that societal and cultural contexts play a key role in how euthanasia practice has been adopted after legalization," the authors conclude.

More information: *Canadian Medical Association Journal*, www.cmaj.ca/lookup/doi/10.1503/cmaj.160202

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