

INTRODUCTION

Physician-assisted suicide (PAS): measure that patients can take to terminate their life through *self-administration* of a lethal amount of drugs prescribed by a physician after receiving an explicit request from the patient.

In the United States, PAS is currently allowed in 11 states: Oregon, Washington, Montana, Vermont, California, Colorado, the District of Columbia, Hawaii, New Jersey, Maine, and New Mexico. The patient must be at least 18 years old, capable of making and communicating their own healthcare decisions, and diagnosed with a terminal illness that leads to death within 6 months.²

Other terms used to refer to PAS: physician-assisted death, aid in dying, physician-assisted dying, medical aid in dying.³

OBJECTIVES

- Identify student pharmacists' perceptions & comfort levels regarding the PAS process.
- Identify student pharmacists' knowledge on PAS laws and regulations.
- Gain insight into how student pharmacists obtain education regarding PAS.

Pharmacists currently perform patient interviews and counseling on all other medications prescribed by physicians. It is clinically proven that the collaborative partnership in the patient care is beneficial to the patient.

Pharmacists have the right to conscientious objection, but they still need to fulfill their obligations to the patient through other means. Pharmacists are often not adequately trained in end-of-life care. Focusing on developing educational programs for student pharmacists will allow them to develop the knowledge and skills related to PAS needed to care for this special population.

METHODS

A short survey was sent electronically to all the student pharmacists in Shenandoah University (P1-P4 and all campuses). The survey was generated and administered via SurveyMonkey™ and distributed via email. The survey was open for ten weeks and the participants completed the questionnaire voluntarily. The target response rate was 70%. Participants were not compensated for their completion of the survey.

The survey questionnaire was tested in advance to test the validity of the questions to the survey responses and to determine the easiness of completing the survey.

RESULTS

	n (%)
Gender	
Male	15 (27.8)
Female	38 (70.4)
Experience with "End of Life" Care	
Yes	17 (31.5)
No	37 (68.5)
Type of "End of Life" Care	
Family/ loved one	10 (71.4)
Work experience	2 (14.3)
Received education on related information	1 (7.7)

Figure 1: Student Pharmacists' Knowledge on PAS Medications

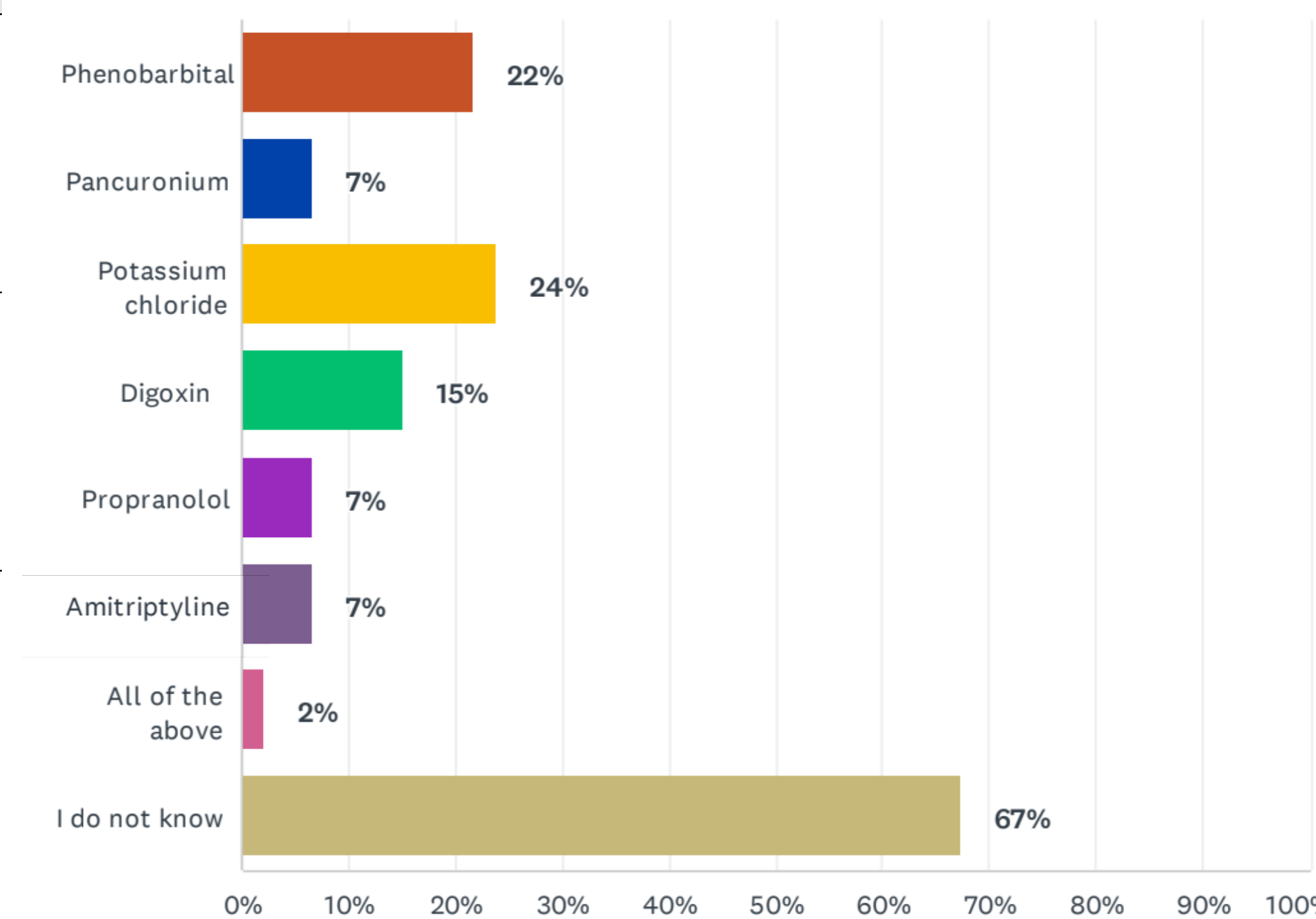


Figure 2: Student Pharmacist's Next Course of Action if Refusal to Participate in PAS

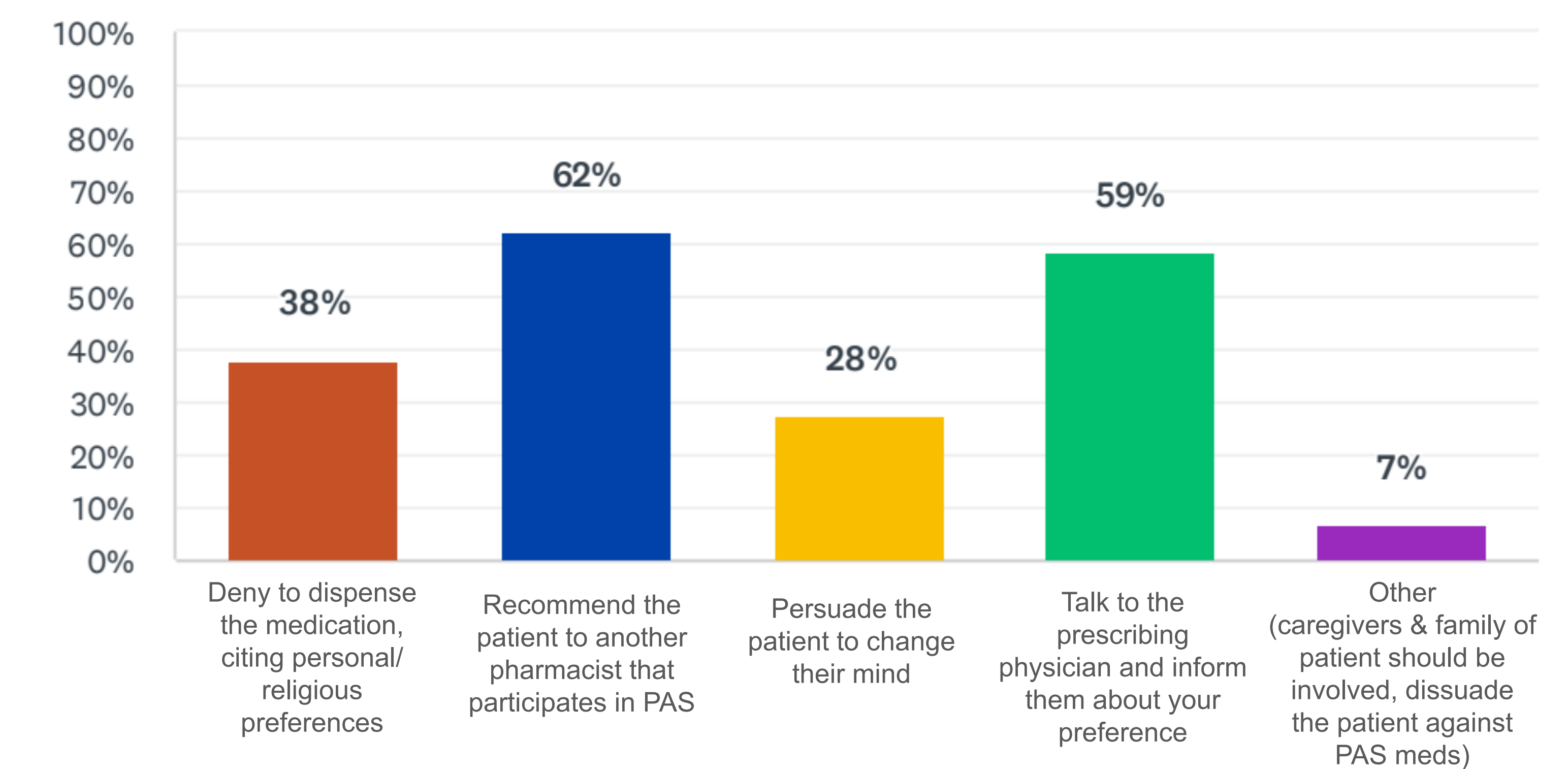


Table 2: Student Pharmacists' Attitudes, Perceptions, and Comfort Levels

	Strongly Agree	Agree	Neither	Disagree	Strongly Disagree
A mentally competent, terminally ill patient should have the option for Physician Assisted Suicide	41.18% (20)	13.73% (5)	21.57% (6)	9.80% (5)	13.73% (6)
The dispensing pharmacist should be informed by the physician about the intent/purpose of a lethal medication, prior to dispensing	66.67% (32)	20.83% (10)	6.53% (3)	2.08% (1)	4.17% (2)
I currently feel comfortable with my knowledge of the current federal laws and regulations regarding Physician Assisted Suicide	2.17% (1)	8.70% (4)	30.43% (14)	47.53% (22)	10.87% (5)
I currently feel comfortable with my knowledge of the current Virginia laws and regulations regarding Physician Assisted Suicide	2.17% (1)	15.22% (7)	28.26% (13)	41.30% (19)	13.04% (6)
I currently feel comfortable counseling patients regarding Physician Assisted Suicide	0% (0)	13.04% (6)	28.26% (13)	26.09% (12)	32.61% (15)
As a future pharmacist, I feel comfortable dispensing lethal medications to terminally ill patients legally approved to receive Physician Assisted Suicide	17.39% (8)	19.57% (9)	15.22% (7)	21.74% (10)	26.09% (12)

Table 3: Education/Training Related to PAS

	n (%)
Didactic Education/Experiential Training	
Previously received	4 (8.7)
Never received	42 (91.3)
Types of PAS Related Education Received	
Lectures	4 (100)
Areas of Knowledge/Experience Obtained	
Palliative care including prolonged sedations	1 (50)
Palliative care including pain management, sedation, and PAS	1 (50)
"Pharmacy school curriculum should include education about PAS"	
Strongly agree	15 (33)
Agree	20 (43)
Neither agree or disagree	8 (17)
Disagree	3 (7)
Strongly disagree	0 (0)
Student Pharmacist's Preference on PAS Education	
Didactic courses	26 (54)
Experiential rotations	15 (33)
Specialized certifications/training	23 (50)
Online resources/databases/podcasts	25 (54)
Dean's hour/guest speaker	27 (59)

DISCUSSION

- The study exhibited a uniform distribution among student classes and campuses.
- The survey obtained a greater number of responses from female students, indicating a similarity in demographic characteristics across pharmacy schools.
- Low knowledge level: few student pharmacists were able to select correct medications used for PAS.
- Inconsistent course of action: 38% responded by denying to dispense the medication, citing personal/religious preference.

CONCLUSIONS

- Student pharmacists need to gain the *comfort* and *knowledge* required in dispensing PAS medications to fulfill the ethical obligation to their patients.
- Student pharmacists addressed the needs of school curriculum to learn about PAS.
- Further research may be necessary to generalize the findings as this study had a smaller sample size.

REFERENCES

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