Survey: Medical Assistance in Dying in Neuro-Oncology

Dear Colleague,

We are inviting you to take part in a research study about medical assistance in dying. Medical assistance in dying (MAiD), also known as medically assisted death, is currently legal in several countries across the globe, including Canada, Belgium, Colombia, Luxembourg, the Netherlands, and Switzerland, plus parts of America and Australia. More countries and regions are considering legalizing MAiD.

Some aspects of the MAiD process are unique to brain cancer patients because of the way their disease can affect decision-making capacity. We are interested in understanding how the neuro-oncology community considers specific clinical variables in determining brain cancer patients’ eligibility and capacity for a MAiD decision. We have developed a brief 25-question survey, which should take only a few minutes of your time to complete.

Participation is voluntary and confidentiality of the information will be protected.

We would greatly appreciate your input.

If you have any questions, you may contact me at warren.mason@uhn.ca or 1-416-946-2277.

Sincerely,

Warren Mason, MD, FRCPC

Medical Director
Gerry and Nancy Pencer Brain Tumour Centre
Princess Margaret Cancer Centre, University Health Network

Section 1 (Survey Eligibility)

Are you involved in the clinical care of brain cancer patients?

☐ Yes
☐ No

Section 2 (Background Information)

1. What is your role?

☐ Neuro-oncologist or medical oncologist
☐ Neurosurgeon
☐ Radiation oncologist
☐ Clinical fellow
☐ Resident
☐ Medical student
☐ Nurse practitioner or physician assistant
☐ Psychologist
☐ Other: Please specify

Other role _______________________________________________________________________

2. For how many years have you been treating brain cancer patients?

☐ 0 to 4 years
☐ 5 to 9 years
☐ 10 to 14 years
☐ 15 to 19 years
☐ 20 or more years

3. What is your gender?

______________________________________________________________________________

☐ Male
☐ Female

4. Do you treat adult patients, pediatric patients, or both?

☐ Adult
☐ Pediatric
☐ Both
6. Approximately how many brain cancer patients do you see every week?  
   - Less than 1 per week
   - 1 to 2 per week
   - 3 to 10 per week
   - 11 to 20 per week
   - 21 to 50 per week
   - 51 or more per week

7. What country do you live in?  
   ________________________________________

8. Is medical assistance in dying (MAiD), assisted death, or assisted suicide legal where you live?  
   - Yes
   - No
   - Unsure

9. Have you ever participated in the medical assistance in dying (MAiD) process (as an assessor or by prescribing medications)?  
   - Yes
   - No

10. What is your religion, if any?  
    ________________________________________

11. Do you hold moral objections to medical assistance in dying (MAiD)?  
    - Yes
    - No
    - Unsure

Section 3 (Scenarios and Questions)

1. When do you become worried that a patient with brain cancer no longer has the capacity to make complex decisions?  
   ________________________________________

2. What cognitive functions do you think are most important to have in order to be capable of consenting to medical assistance in dying? Please choose the top three factors.

<table>
<thead>
<tr>
<th>Cognitive Function</th>
<th>1</th>
<th>2</th>
<th>3</th>
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<tbody>
<tr>
<td>Complex attention</td>
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<td>Executive function</td>
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<td>Learning and memory</td>
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<td>Language</td>
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<td>Perceptual-motor</td>
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<td>Social cognition</td>
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3. A 70-year-old woman with a left frontotemporal glioblastoma diagnosed one year ago developed progressive disease on standard of care therapy. She has receptive aphasia: she can only understand 50% of what others say to her. She decides that she wants medical assistance in dying. You are the health care provider about to assess her.

Do you believe she will have the mental capacity to make this decision?
3a Why? (Response optional) __________________________________________

4 A 70-year-old woman with a left frontal glioblastoma diagnosed one year ago developed progressive disease on standard of care therapy. Her family is concerned about her new memory loss. She tends to wander, leaves the stove on unattended, and forgets the names of old friends. She decides that she wants medical assistance in dying. You are the health care provider about to assess her.

Do you believe she will have the mental capacity to make this decision?

4a Why? (Response optional) __________________________________________

5 A 70-year-old woman with a bifrontal glioblastoma diagnosed one year ago developed progressive disease on standard of care therapy. She has profound fatigue, and spends up to 20 hours per day asleep. During conversations, she falls asleep after a couple minutes of chatting. She decides that she wants medical assistance in dying. You are the health care provider about to assess her.

Do you believe she will have the mental capacity to make this decision?

5a Why? (Response optional) __________________________________________

6 A 70-year-old woman with a bifrontal glioblastoma diagnosed one year ago developed progressive disease on standard of care therapy. She has personality changes, according to her family. She is now more impulsive, irrational, and her family can hardly recognize her. She decides that she wants medical assistance in dying. You are the health care provider about to assess her.

Do you believe she will have the mental capacity to make this decision?

6a Why? (Response optional) __________________________________________
7  A 70-year-old man with a left hemispheric glioblastoma, diagnosed 6 months ago developed progressive disease on standard of care therapy. His Eastern Cooperative Oncology Group (ECOG) performance status is 3. He lives alone. He decides that he wants medical assistance in dying. You are the health care provider assessing him.

If medical assistance in dying (MAiD) were legally available in your jurisdiction, would you support his decision to access it?

7a  Why? (Response optional)

8  A 70-year-old man with a left hemispheric glioblastoma, diagnosed 6 months ago developed progressive disease on standard of care therapy. His ECOG performance status is 1. He lives alone. He decides that he wants medical assistance in dying. You are the health care provider assessing him.

If MAiD were legally available in your jurisdiction, would you support his decision to access it?

8a  Why? (Response optional)

9  A 20-year-old man with a left hemispheric oligodendroglioma (grade II), diagnosed 6 months ago developed progressive disease on standard of care therapy. His ECOG performance status is 1. He lives alone. He decides that he wants medical assistance in dying. You are the health care provider assessing him.

If MAiD were legally available in your jurisdiction, would you support his decision to access it?

9a  Why? (Response optional)

10  A 70-year-old man with a left hemispheric glioblastoma was diagnosed 1 week ago and is seeing you in clinic for consideration of treatment options. His ECOG performance status is 3. He lives alone. He decides that he wants medical assistance in dying. You are the health care provider assessing him.

If MAiD were legally available in your jurisdiction, would you support his decision to access it?

10a  Why? (Response optional)
A 20-year-old man with a left hemispheric glioblastoma was diagnosed 1 week ago and is seeing you in clinic for consideration of treatment options. His ECOG performance status is 3. He lives alone. He decides that he wants medical assistance in dying. You are the health care provider assessing him.

If MAiD were legally available in your jurisdiction, would you support his decision to access it?

11a Why? (Response optional)