

Background

- In 2024, MAiD represented 5.1% of all Canadian deaths, with about 2.3% of those involving individuals with dementia (1).
- MAiD requests in the context of dementia present distinctive challenges, particularly related to fluctuating or progressive loss of decision-making capacity and uncertainty regarding timing of referral.
- As the Canadian population continues to age, the number of people living with dementia is projected to rise sharply. By 2030, it is estimated that 1 million Canadians will be affected by dementia. (2)
- The Champlain Regional MAiD Network (CRMN) serves approximately 1.1 million residents across Eastern Ontario.

Objectives & Methods

Objectives

- Gain understanding of the characteristics of individuals with dementia seeking MAiD in the Champlain region of Eastern Ontario
- Identify service gaps
- Inform future planning for care and resources

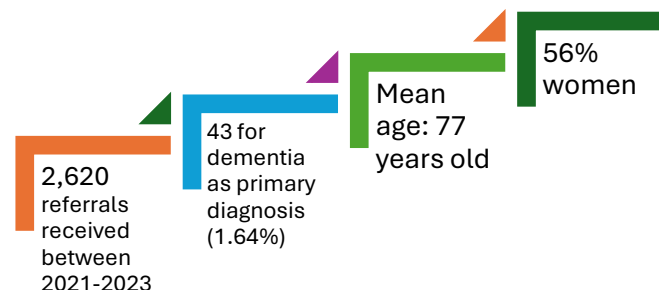
Methods

- Retrospective descriptive chart reviews of individuals referred to CRMN between January 2021 and December 2023
- De-identified data collected on demographics, dementia diagnosis, stage of illness, living situation, functional status, referral timing, assessment outcomes, and MAiD provision.

Results

Diagnosis	% of referral
Alzheimer's	23.26
Unspecified dementia	18.6
Mixed	18.6
Vascular	13.95
Mild Cognitive Impairment	13.95
Lewy Body	4.65
Aphasia	4.65
Frontotemporal	2.33

Functional Status
47% patients were dependent for both ADLs/IADLs



23 patients proceeded to eligibility assessments

Common reasons for non-progression included loss of capacity/patient death/change of mind (n=8); incomplete follow-up after intake (n=11), and lack of assessor availability (n=1)

16 patients found eligible

7 patients found ineligible

Lacked capacity (n=3) or not experiencing intolerable suffering (n=4)

10 received MAiD

Waiver of final consent signed for 7/10 patients who received MAiD, none invoked

The remaining 6 eligible patients did not receive MAiD either due to death from other cause (n=1) or because they had not yet requested a provision at time of data collection (n=5)

Discussion

- Dementia can affect an individual's ability to be assessed for and receive MAiD, thus leaving a care pathway unaddressed for a fair number of individuals who do not meet criteria for their preferred end of life option.
 - The issues of capacity frequently arise, as individuals with dementia may retain a reasonable quality of life in the present but face deep anxiety about their future.
 - The fears that drive many to consider MAiD – such as anticipated loss of autonomy or identity – are often the very factors that, at the time of request, may disqualify them from eligibility (3).
- Attention must be paid to individuals seeking MAiD who do not meet eligibility criteria, ensuring that they are not overlooked in terms of access to appropriate care.
- Potential legalization of advanced requests for MAiD in Canada would create a large resource need for counseling, clinical time and consultation with those individuals.
- The typically slow, progressive and long nature of the disease means that individuals may experience gradual declines interspersed with abrupt deterioration related to illness or disease progression. Unlike many terminal illnesses, dementia often lacks pronounced physical symptoms, making it harder to access or deliver traditional palliative care services (4,5,6), which is a well-documented gap.

References

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