

Letter: Advanced Directives are valuable

To the Editor: In a recent issue of the Journal, WM Politzer refers to the problem of valid consent for the withdrawal or withholding of medical treatment from terminally ill patients who are 'mentally incompetent' and the consequent necessity of a High Court application.¹ That rather forbidding term will of course often apply to those who are simply too ill to give informed consent. However, that is the moment of care when an Advanced Directive, sometimes still referred to as a Living Will, can be of critical value to patient, doctor and family.

For many doctors there may be an aura of uncertainty about their validity. McQuoid-Mason wrote in 2005 that 'Living Wills have not yet been recognized by South African courts or legislation and are still being considered by the government'.² I have recently tried to draw more attention to this most unfortunate delay.^{3,4}

At present the caring doctor has to make the best of this incomplete legislative job and can be assured by McQuoid-Mason's submission that there are principles in South African law which give patients the capacity to make such advanced decisions.² He further found that whilst 'neither living wills nor enduring powers of attorney have been recognized by statute' the National Health Act (Act 61 of 2003) 'introduces an informal method for the appointment of proxies to make health decisions'.⁵

In 2006 Brigid Raw, Director of SAVES – The Living Will Society, drew the attention of SAMJ readers to the availability of a ready-to-sign Living Will from the Society of Living Wills.^{6,7} However, time has shown the importance of drafting and revising one's own advanced directive. The SAMA's excellent Guidelines for Medical Practitioners

on Living Wills (2008) states (para 4) 'Patients frequently believe that an advanced directive to refuse life-saving or sustaining treatment will be honoured under all circumstances. The reality of medical practice makes this impossible. If an advance directive is specific to a particular set of circumstances the directive will have no force when these circumstances do not exist. If an advance directive is so general that it applies to all possible events that could arise, it could be viewed as too vague to give any definitive direction to the doctor. In either case doctors will have to rely on their professional judgment to reach a decision.' The forward thinking of one's advanced directive should benefit from consultation with the family doctor and be shared with family. It may have been drawn up while in good health, but the nature of a serious illness and its prognosis may need its specific revision.

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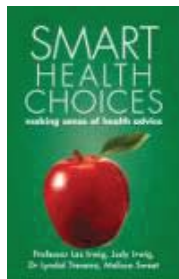
Book Review

Smart Health Choices: Making sense of health advice

By Irwig L, Irwig J, Trevena L, Sweet M

London: Hammersmith Press, 2008. 242 pages

Price R282, ISBN number: EAN = 9781905140176



This is an updated and more international version of an earlier Australian book.¹ In essence it is evidence-based medicine for the layperson; it is intended to help patients to evaluate the potential benefits and harms of various therapeutic and management options.

It has three main sections to it. The first, "Health advice can be harmful" introduces the issues around health advice and the problems for both consumers and health professionals. The second, "Your body, your choice", assists readers to make better decisions by asking the right questions. The third, which makes up the bulk of the book, provides help in assessing sources of information.

The authors suggest five key questions to be asked in order to make a smart health choice. These form the core of the book. The questions are:

1. What will happen if I wait and watch?
2. What are my test or treatment options?
3. What are the benefits and harms of these options?
4. How do the benefits and harms weigh up for me?
5. Do I have enough information to make a choice?

The questions are relevant and practical, and useful both for patients and their doctors. The book would appeal to people who approach health care choices in a logical and practical way, and are willing to enquire more about their health care choices.

The book is well written, readable and very practical with helpful summaries at the end of each chapter. The sense of humour is enjoyable as well as the cartoons. The authors give good relevant guidelines to the type of questions one can ask a medical professional.

The explanations about medical research are written simply for easy understanding. This gives a good explanation even for professionals to use as a way of explaining research to their patients. The authors give a balanced view of health care from both the patient/client and health care perspectives.

My only criticism is that the book relies on patients taking the initiative in asking questions of their medical professionals. Most patients (at least in South Africa) believe that a medical professional will give this advice to them in a consultation without them having to ask, which often is not the case. It also needs to be acknowledged that smart health care choices are not only about being practical and logical; we are all very vulnerable and emotional when making our health care decisions. Denial remains a huge challenge in the doctor patient relationship and effectively dealing with an illness or condition. However, this book can help patients come to terms with the decisions they need to make and to collaborate fully in the process of making smart health choices.

It is a book I regularly recommend to friends when they are facing health care choices, and I have used it in teaching undergraduates and postgraduates.

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