

# 2019 Death with Dignity Act Report

August 16, 2021

Chapter 70.245 RCW

Disease Control & Health Statistics  
Center for Health Statistics



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# Executive Summary

Washington State's Death with Dignity Act allows adult residents in the state with six months or less to live to request lethal doses of medication from a physician. This report provides available information about people who participated in the program between January 1, 2019, and December 31, 2019. This report includes data received by the Washington State Department of Health as of August 13, 2021. In this report, a participant is defined as someone to whom medication was given under the terms of the law.

Beginning in 2019, the number of participants who received medication was calculated using expanded criteria. In addition to individuals with a valid prescription date on the pharmacy dispensing form, individuals with a valid prescription date on either the Attending Physician's Compliance Form or the After Death Reporting Form were also included.

A total of 299 individuals received the medication in 2019.

- 153 different physicians prescribed the medication.
- 41 different pharmacists provided the medication.

The department received death certificates for 297 participants and After Death Reporting Forms for 279 participants.

- 299 participants are known to have died.
  - 225 died after taking the medication.
  - 30 died without having taken the medication.
  - We don't know whether the remaining participants took the medicine.

Out of the 225 that died after taking the medication:

- 91% were enrolled in hospice care when they took the medication.
- 88% had some form of health insurance.
- 90% died at home/in a private residence.

Demographics of participants (as indicated in death certificates, 297 participants):

- The average age of participants was 73 years.
- 95% of participants were white. We are unable to report other races due to the small numbers involved and the need to protect participant confidentiality.
- 85% of participants lived west of the Cascade mountains<sup>1</sup>.

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<sup>1</sup> Based on death certificate information. Counties west of the Cascades: Clallam, Clark, Cowlitz, Grays Harbor, Island, Jefferson, King, Kitsap, Lewis, Mason, Pacific, Pierce, San Juan, Skagit, Skamania, Snohomish, Thurston, Wahkiakum, and Whatcom.

# Notes on Report

For the purposes of this report, a participant of the Death with Dignity Act in 2019 is defined as someone who received medication in 2019 under the terms of the act. Details of the act are included in Appendix A.

Beginning in 2019, the number of participants who received medication was calculated using expanded criteria. In addition to individuals with a valid prescription date on the pharmacy dispensing form, individuals with a valid prescription date on either the Attending Physician's Compliance Form or the After Death Reporting Form were also included<sup>2</sup>.

As of August 13, 2021, the department has received documentation indicating that lethal doses of medication were given to 299 participants under the law in 2019. These prescriptions were written by 153 different physicians and provided by 41 different pharmacists. The department has not yet received all required paperwork for all participants. Table 5 in Appendix A shows details of the documentation that has been received by the department. When all the required paperwork is not received, department staff contact health care providers to obtain the documentation.

Among the 299 participants who received medication in 2019, the department has confirmed that 299 have died; 225 took the medication, 30 did not take it, and the ingestion status is unknown for the remaining participants (Figure 2). We established death of a participant through receipt of the After Death Reporting Form and/or a registered death certificate.

The information presented in this report is subject to the Department of Health Agency Standards for Reporting Data with Small Numbers. Some fields have therefore been suppressed due to their small numbers. For more information, the guidelines can be accessed here: <https://www.doh.wa.gov/Portals/1/Documents/1500/SmallNumbers.pdf>

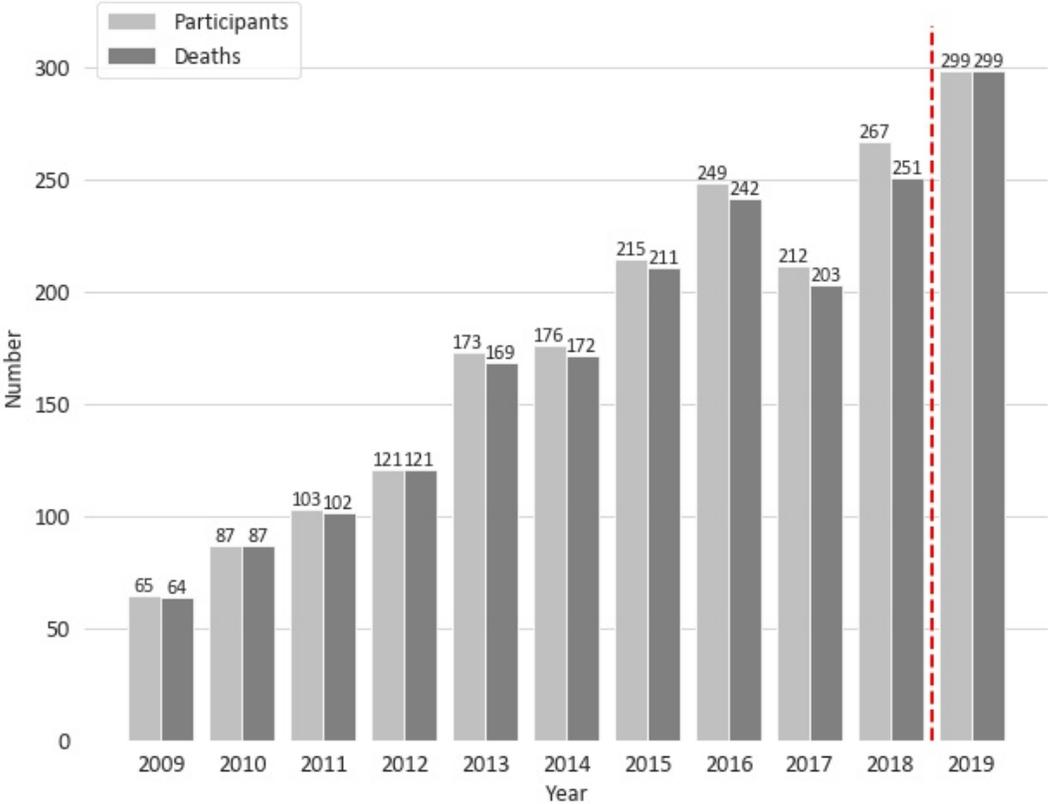
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<sup>2</sup> These dates were used in a hierarchical manner in the order stated. Any participants with multiple available dates were only counted once.

# Death with Dignity Participation Over Time

Since the publication of the last Death with Dignity report, the department received additional information on participants from prior years. Figure 1 shows the number of participants and the number of deaths as of August 13, 2021, for 2009 through 2019. The status of the remaining participants in prior years remains unknown. These participants may have died, but no documentation of their death has been received.

Figure 1. Number of Death with Dignity participants and known deaths, 2009-2019<sup>3</sup> (the dotted line represents a change in inclusion criteria).<sup>4</sup>



<sup>3</sup> Participants prior to 2019 were counted based on receipt of the pharmacy dispensing form. Deaths prior to 2019 were counted based on registered death certificates.

<sup>4</sup> Participants from 2019 onwards were counted using the receipt of the pharmacy dispensing form, or receipt of another form that indicates that medication was dispensed. Deaths were counted based on receipt of a registered death certificate or a valid date of death on an After Death Reporting Form. Due to COVID-19 the Center for Health Statistics had limited capacity for follow-up of incomplete documentation and, in order to ensure we counted all participants, expanded the criteria for inclusion as a death with dignity participant.

Table 1. Death with Dignity Act Participation, 2019

Participant Characteristic	Number	Percent
<b>Sex<sup>5</sup></b>		
Male	164	55.2
Female	133	44.8
Total	297	100.0
<b>Age (years)<sup>5</sup></b>		
18-54	13	4.4
55-64	61	20.5
65-74	95	32.0
75-84	72	24.2
85+	56	18.9
Total	297	100.0
<b>Marital Status<sup>5</sup></b>		
Married	140	47.1
Divorced	73	24.6
Widowed	54	18.2
Never married	28	9.4
Other/unknown	**	**
Total	297	100.0
<b>Education<sup>5</sup></b>		
Some College/College Degree	226	76.1
Some High School/High School Degree	66	22.2
Unknown	**	**
Total	297	100.0
<b>Residence<sup>6</sup></b>		
West of Cascades	252	84.8
East of Cascades	45	15.2
Total	297	100.0

<sup>5</sup> Based on death certificate information.

<sup>6</sup> Based on death certificate information. Counties west of the Cascades: Clallam, Clark, Cowlitz, Grays Harbor, Island, Jefferson, King, Kitsap, Lewis, Mason, Pacific, Pierce, San Juan, Skagit, Skamania, Snohomish, Thurston, Wahkiakum, and Whatcom. Counties east of the Cascades: Adams, Asotin, Benton, Chelan, Columbia, Douglas, Ferry, Franklin, Garfield, Grant, Kittitas, Klickitat, Lincoln, Okanogan, Pend Oreille, Spokane, Stevens, Walla Walla, Whitman, and Yakima.

Insurance Status <sup>7</sup>		
Insured	246	88.2
Uninsured	33	11.8
Total	279	100.0
Patient Race <sup>8</sup>		
White	281	94.6
Asian	**	**
Other	**	**
Black	**	**
Hispanic	**	**
Unknown	**	**
Total	297	100.0

Table 2. Death with Dignity Act Participants' Underlying Illness, 2019

	2019	
	Number	%
Underlying illness <sup>9</sup>		
Cancer	188	72.3
Neurodegenerative	27	10.4
Other	20	7.7
Heart disease	15	5.8
Respiratory disease	10	3.8
Total	260	100.0

<sup>7</sup> Data are collected from After Death Reporting Forms.

<sup>8</sup> Based on death certificate information.

<sup>9</sup> Data are collected from the Attending Physician Compliance Form.

Table 3. End of life concerns of participants who died, 2019

	2019	
	Number	%
<b>End of Life Concerns<sup>10</sup></b>		
Less able to engage in activities making life enjoyable	232	89.6
Loss of autonomy	229	88.4
Loss of control of bodily functions	137	54.2
Burden on family, friends/caregivers	147	57.6
Loss of dignity	180	71.1
Financial implications of treatment	21	8.4
Inadequate pain control/Concerns about pain control	105	41.3
Total	279	--

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<sup>10</sup> Data are collected from the After Death Reporting form. Participants may report more than one concern. Total concerns therefore can exceed the total number of participants.

Table 4. Time Intervals, 2019

	2019	
	Number	%
<b>Time Between First Oral Request and Death<sup>11</sup></b>		
15-30 days	78	28.9
31-60 days	59	21.9
61-90 days	26	9.6
91-120 days	22	8.1
More than 120 days	49	18.1
Not Known	36	13.3
Total	270	100.0
<b>Time between Ingestion and Loss of Consciousness<sup>12</sup></b>		
0 to 5 minutes	72	32.0
10 to 20 minutes	22	9.8
6 to 10 minutes	72	32.0
More than 20 minutes	**	**
Not known	52	23.1
Total	225	100.0
<b>Time between Ingestion and Death<sup>12</sup></b>		
0 to 30 minutes	52	23.1
31 to 60 minutes	53	23.6
61 to 120 minutes	28	12.4
More than 120 minutes	57	25.3
Not known	35	15.6
Total	225	100.0

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<sup>11</sup> Based on Pharmacy Dispensing Report

<sup>12</sup> Based on After Death Reporting Form

# Appendix A

## Overview of Death with Dignity Act

The Washington State Death with Dignity Act, chapter 70.245 RCW, was passed by voter initiative on November 4, 2008, and became law on March 5, 2009. The law allows terminally ill adults seeking to end their lives in a humane and dignified manner to request lethal doses of medication from medical and osteopathic physicians. These terminally ill patients must be Washington residents who have an estimated six months (180 days) or less to live. More information on the Death with Dignity Act is available on the Department of Health website (<http://www.doh.wa.gov/dwda/>).

### *Role of Department of Health in Monitoring Compliance with the Act*

To comply with the act, attending physicians and pharmacists must file documentation with the department. Patient eligibility for participation in the act must be confirmed by two independent physicians (an attending physician and a consulting physician). Within 30 days of writing a prescription for medication under this act, the attending physician must file the following forms with the department:

- Written Request for Medication to End Life Form (completed by the patient)
- Attending Physician Compliance Form (completed by the attending physician)
- Consulting Physician Compliance Form (completed by the consulting physician)

A psychiatric or psychological evaluation is not required under the terms of the law. However, if the attending or consulting physician requests an evaluation, the psychiatrist or psychologist must complete a Psychiatric/Psychological Consultant Compliance Form and the attending physician must file this form within 30 days of writing the prescription.

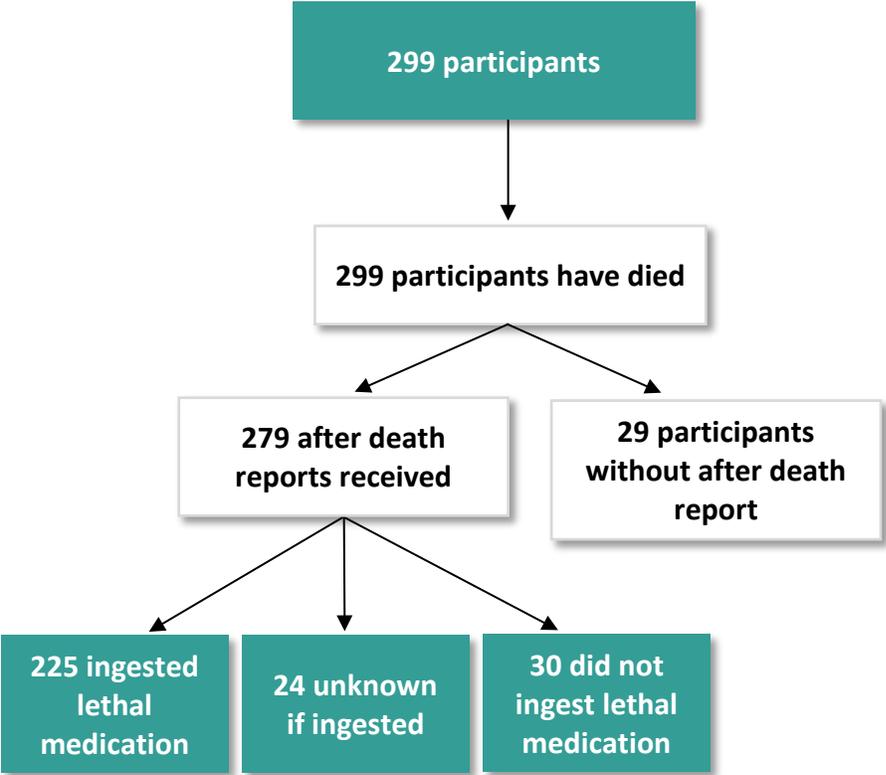
If the attending or consulting physician (or the psychiatrist or psychologist, if a referral is made) determines that a patient does not meet the qualifications to receive a prescription for medication under chapter 70.245 RCW, no forms must be submitted to the department.

Within 30 days of providing medication, the dispensing pharmacist must file a Pharmacy Dispensing Record Form.

Within 30 days of a qualified patient's death from taking a lethal dose of medication obtained under the act, or death from any cause, the attending physician must file an Attending Physician After Death Reporting Form.

To receive the immunity protection provided by chapter 70.245 RCW, physicians and pharmacists must make a good faith effort to file required documentation in a complete and timely manner.

Figure 2. Outcome of the Death with Dignity Act Participants, 2019



The department received the following documentation for 2019 Death with Dignity participants (people who received medication) as of August 13, 2021:

Table 5. Documentation Received for 2019 Participants

Form	Number
Written Request to End Life Form	258
Attending Physician Compliance Form	260
Consulting Physician Compliance Form	254
Psychiatric/Psychological Consulting	** <sup>13</sup>
Pharmacy Dispensing Form	270
After Death Reporting Form	279
Death Certificate	297
Total Participants	299

## Confidentiality

The Death with Dignity Act requires that the department collect information and make an annual statistical report available to the public (RCW 70.245.150). The law also states that, except as required by law, the information collected is not a public record. That means it is not subject to public disclosure. To comply with that statutory mandate, the department will not disclose any information that identifies patients, physicians, pharmacists, witnesses, or other participants in activities covered by the Death with Dignity Act.

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<sup>13</sup> Redacted due to Department Small Numbers Guidelines.

