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Should a person who wants to die always be considered a patient?

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In many countries, patients who commit suicide are usually hospitalized by psychiatrists or physicians, if they consider there is a risk for their own safety. Indeed, suicide attempts do represent a symptom of a wish to die or a plea for aid from suffering people. This suffering of the mind can have a medical cause, including psychiatric or non-psychiatric disorders. Nevertheless, can we consider that there are causes of suicide attempts that cannot be treated untreatable causes of suicide attempts, or at least non medical condition desire to die?

I remember someone whom I took care of in my prehospital emergency care activity, sent after the call of a bystander. With my team, we saved his life against him will from a probable death. In the time of his transfer to the hospital, I performed a medical and psychiatric examination: I found no symptom of psychosis, depression, chronic intoxication or any other chronic medical condition. He only explained he had severe social problems that he could not handle without killing himself. Considering his desire to die and the possibility I might have missed some curable depressive symptoms, I chose to hospitalize him. However, do I have the right to overpass his determination, without any medical element except his wish to die? On the contrary, respect his choice and let his alone would it mean he might commit suicide? It is true that doctors are usually trained to save lives except in the particular situation of palliative disorder. Moreover, in some countries (such as in France), the law mentions the obligation to rescue people for all subject included physician, even though it goes against their liberty of their choice. We can also consider that if someone loses his capacity of choosing to die, this person loses his power to live and is only able to live on. The medical context should not be an excuse to go through personal liberty, even though examination remains essential to diagnose a treatable medical cause.

In conclusion, I think a large ethical debate should be opened in every country concerning what doctors, helped by specialists and psychiatrists, should do in front of a patient who wants

to die, especially where the clinical examination is poor. This is particularly important in the countries where the law forces every subject to save lives if they can, in balance with the liberty to die and to live.