Original Article

The patient suicide attempt — An ethical dilemma case study

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A B S T R A C T

Case description: Nurses face more and more ethical dilemmas during their practice nowadays, especially when they are taking care of the patient at end of life stage. The case study demonstrates an ethical dilemma when nursing staff are taking care of an end stage aggressive prostate cancer patient Mr Green who expressed the suicide thoughts to one of the nurses and ask that nurse keep secret for him in Brisbane, QLD, Australia.

Ethical dilemma identification: The ethical dilemma is identified as “if the nursing staff should tell other health care team members about patient’s suicide attempt without patient’s consent”.

Analysis: To better solving this case and making the best moral decision, the ethical theory, the ethical principles and the Australian nurses’ code of ethics values statement, the associated literature relative with this case are analyzed before the decision making.

Ethical decision making: After consider all of the above factors, in this case, the best ethical decision for the patient is that the nurse share the information of Mr Green’s suicide attempt with other health care professionals.

Results: In Mr Green’s case, the nurse chose to share the information of Mr Green’s suicide attempt with other health care professionals. The nursing team followed the self-harm and suicide protocol of the hospital strictly, they maintained the effective communication with Mr Green, identified the factors which cause patient’s suicide attempt, provided the appropriate nursing intervention to deal with these risk factors and collaborated with other health care professionals to prefect the further care. The patient transferred to a palliative care service with no sign of suicide attempt and other self-harm behaviors and passed away peacefully 76 days after discharged with his relatives and pastors accompany.

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Nurses face more and more ethical dilemmas during their practice nowadays, especially when nurses have responsibility to take care of patients with terminal diseases such as cancer [1]. The case study demonstrates an ethical dilemma faced by a nursing staff taking care of an end stage aggressive prostate cancer patient Mr Green who confided to
the nurse his suicide attempt and ask the nurse to keep the secret for him. This essay will present the clinical case regard to Mr Green’s attempt to suicide, identify the ethical dilemma arise from this clinical case, discusses ethical theory and principles apply to this case, apply the western countries' nurses' code of ethics values statement to this case, analyze the opinion in the associated literature and give some suggestions on how to solve this ethical dilemma.

1. The case description

The patient Mr Green is a 57 year old gentleman with aggressive prostate cancer who is took care of by the nursing team in the oncology department of a general hospital in Brisbane, QLD, Australia. Mr Green was diagnosed with prostate cancer seven years ago but refused medical and surgical treatment at the time. He chose to seek alternative treatment and did not follow up with the urologist over that seven years period. Mr Green has now presented with anemia and hypo-proteinemia. After several diagnostic tests over a period it was discovered that the cancer had metastasized to his bones, it had spread locally to his lymph nodes and the primary tumor was invading the bladder and partially obstructing the left kidney. Mr Green had several admissions over a two month period for various reasons. On the last admission Mr Green was told that he may only have 4–6 weeks (previously it was 6–12 months) to live after a cystoscopy showed further extensive growth of the tumor, it was determined that any further surgical/medical intervention would not be appropriate in this case and that a palliative care regimen was the next step. At this point the patient reported to the health care team that he had resigned himself to the fact that he was going to die. Mr Green pulled one of the author’s colleagues aside and confided to the nurse that he planned to kill himself and that is was a secret that the nurse was not to tell anyone.

2. The ethical dilemma arise from this clinical case

According to the patient’s case, the patient Mr Green with end stage aggressive prostate cancer who had been confirmed that he only have 4–6 week to live expresses the suicide attempt to a nursing staff and asks nurse do not tell others. The behavior of patient put the nursing staff in a difficult situation, which can be identified as an ethical dilemma. Beauchamp and Walters [2] defined an ethical dilemma as a situation happens when person must make a choice among mutually exclusive alternatives. According to Chally and Loric [3], an ethical dilemma always occurs when “a moral problem involving two or more mutually exclusive, morally correct actions” (p. 17). In Mr Green’s case, after the patient confided the suicide attempt, the nursing staff has two exclusive, morally correct choices. If the nurse chooses to keep secret as patient required, this behavior will respect patient’s own decision. However, the nursing staff’s decision may cause the patient actually commit suicide without any healthcare intervention. If the nursing staff chose to tell other health care team members about patient’s suicide attempt, the health care team would be involved in monitoring, prevention and avoiding suicide, but the patient’s autonomy, confidentiality would be violated. Therefore, the major ethical dilemma of this case can be identified as ‘if the nursing staff should tell other health care team members about patient’s suicide attempt without patient’s consent.’

3. Analysis of the ethical dilemma

3.1. The ethical principles apply to this case

Some research identified the relationship between the ethical dilemmas and ethical principles. According to Johnston [4], the logical incompatibility between two principles can cause the ethical dilemmas, especially in the moral situation that two different ethical principles can be applied, but using one principle must violate the other principle. In the Mr Green’s case, the ethical principle autonomy and beneficence can be applied equally, but none of them can be chosen without violating other one. The significant logical incompatibility between autonomy and beneficence in this case is the major reason which causes the ethical dilemma about ‘if the nursing staff should tell other health care team members about patient’s suicide attempt without patient’s consent’. In addition, the ethical principle non-malefence is considered in this moral situation which infringes autonomy principle but gives support to beneficence principle. Therefore, when considering Mr Green’s case, three ethical principles are in conflict: respect for autonomy, non-malefence and beneficence.

Bate [5] defined beneficence as “the quality of doing good, taking positive steps to help others, or the notion that one ought to do or promote action that benefits others” (p. 343). It can be referred as actions which mainly focus on benefiting other people [6]. In the health care area, one of the most important obligations of nursing staff is take the positive action to promote health and wellbeing of patients [7]. It means that the nursing staff has to consider which actions will be better for patient. Applying beneficence to ethical dilemma in Mr Green’s case, the nurse has to consider the question which choice will be better for Mr Green. Department of Ageing Disability and Home Care stated that the beneficence principle requires nursing staff do everything to promote patient’s health and maintain patient’s safety. It is obvious that the nursing staff tells other health care professionals about Mr Green’s self-harm attempt, thus the health care intervention can be involved to prevent the actual suicide will be a better choice and will fit the beneficence principle.

Beside beneficence principle, “Non-malefence invokes the obligation not to harm others”. Refer non-malefence to health care area, it emphasized that the health care staff has to make sure their actions would not cause harm to patient [8]. In Mr Green’s case, the non-malefence principle requires the nurse take an action to ensure patient not to harm himself instead of ignoring patient’s potential self-harm. Therefore, the action of telling others ensures no further self-harm
behavior of patient corresponds with non-maleficecence consideration.

There is an issue which needs to be noticed. It is important that when applying the beneficence and non-maleficecence principles, the patients' own perspective about benefit and harm of themselves needs to be assessed [9]. Therefore, in Mr Green's case, Mr Green's own perspective of benefit and harm need to be considered. Mr Green's concept of greatest benefit would be to be allowed to die. And nurse's behavior of keeping silent would not be considered as harmful from his perspective.

Friedman [10] defined Autonomy as “a form of personal liberty of action in which the individual determines his/her own course of action in accordance with a plan chosen by himself/herself” (p. 450). It means that the autonomy principle respects competent patient's right to make their own decisions. In the meantime, autonomy also required nursing staff to respect patients' confidentiality and ensure nursing staff's actions have informed consent of their patients [11]. Applying this principle to Mr Green's case, the choice of keeping secret respects patient's right of self-determination and informed consent.

But the choice of keeping secret would ignore patient's potential suicide and would lead to patient's self-harm behavior. According to Howard, Fairclough, Daniels and Emanuel [12] the cancer patients would be more likely to seek assistance with dying. One type of assisted dying behavior of health care staff is “re refraining from interventions to prevent or dissuade the patient from taking his or her life”. In Mr Green's case, the choice of keeping secret can be classified into assisted dying. Sneesby [13] pointed that “the ethical principle of autonomy is not upheld in law regarding euthanasia and assisted suicide, ‘as people do not have the right to be assisted to die at any time they choose’” (p. 456). Therefore, although Mr Green's autonomy should be respected, but it can not override the common law which identifies that professionals' behavior of assisted dying are prohibited restrictedly.

Some research also pointed that if patient in some special situation made the irresponsible decision which would cause severe consequences to themselves or/and others, the health care professionals should override their wishes in order to minimize and prevent these consequences [14]. In Mr Green's case, the suicide attempt can be identified as a decision which causes the serious self-harm result. Therefore, Mr Green's autonomy can be overridden in order to avoid his suicide attempt. In addition, the assessment of Mr Green's current situation when he made the decision is needed, because some research emphasized that patient with mental disorder or unstable emotional condition can not be considered as a competent person who can make decision for themselves.

3.2. The ethical theory apply to this case

Besides the ethical principles, one of the consequentialist theories, utilitarianism, can be used in above case to determine the better moral decision. Singer [15] indicated that utilitarianism emphasized the good action is the action which maximizes pleasure and minimizes pain to most of people. The principle of utility becomes the fundamental principle of ethics. According to this principle, the moral right action is the action which creates the best outcomes for greatest number of people [16]. The patient, his family and health care staff are involved in Mr Green's case, thus the ethically correct choice should be an action which benefits for most of them.

Comparing the two options of the nurse in above case, the choice of 'keeping secret' would cause the patient commit suicide. This outcome only benefits Mr Green because this action satisfies his desire to die. Moreover, some research stated that suicide has negative impact on family and health care staff especially emotional impact. For instance, the people who have lost family members to suicide are more likely to feel guilty, shame and upset. Therefore, it is obvious that 'keeping secret' would not be the moral correct action.

In contrast, the possible outcome of the action “telling others” is the patient's suicide behavior would be prevented and avoided by health care professionals' intervention. This outcome lengthens Mr Green's life and maintains his safety which makes both his family and health care professionals feel happy. Some research indicated that most family members would be gratified and satisfied if they could spend more time with their dying relatives [17]. In the meantime, as the health care providers, one of the duties of them is maintaining patients' safety [18]. Health care givers will be satisfied when duty is fulfilled. Therefore, the choice of 'telling others' will be the ethical correct choice because it benefits most people in Mr Green's case.

3.3. The western countries' nurses' code of ethics values statement apply to this case

This is an ethical dilemma case which happened in Australia, therefore, the considerations of the Australian's National Code of Ethics for Nurses and Midwives is significant for case solving.

The National Code of Ethics for Nurses and Midwives published in 2008 is a new guideline for ethical and professional behavior of nurses and midwives in Australia. It contained eight value statements which focus on assisting nurses on moral decision making [19]. Some of the statements can apply to Mr Green's case in order to make the most appropriate ethical decision.

First of all, ANMC [19] indicated that “Nurses value informed decision making” (p. 8). That means that nurses have to respect patients' right to involve and share the decision of their own health care and treatment. According to this ethical value statement, Mr Green's decision of suicide should be respected. But ANMC emphasized that “Nurses also value the contribution made by persons whose decision making may be restricted because of incapacity, disability or other factors, including legal constraints” (p. 8) when they explained this statement. Therefore, the assessment of Mr Green's current condition became necessary for nurse to determine if his decision should be respected. Moreover, as the legal consideration, the option of 'keeping secret' to respect autonomy which can be identified as letting people die by not acting is an illegal action according to Australian law [20].
Secondly, ANMC pointed that the first and the most important value statement of nurse are providing the quality of health care. Besides this statement, the fourth statement indicated that “Nurses value access to quality nursing and health care for all people” [19]. These two statements expect nurse to do no harm, to do good and fair things to all people. They also require nurse to create the quality and safe practice environment and minimize the harm to patients. Considering these two statements in Mr Green’s case, nurses have obligation to ensure Mr Green’s safety and ensure safe practice environment. Therefore, it is obvious that the action of sharing information about Mr Green’s potential suicide with other colleagues would support to create safe surroundings to monitor his following behaviors and reduce the risk of actual suicide.

In addition, according to ANMC, nurses have responsibility to value ethical management of information. According to this value statement, nurses should respect patients’ wishes about with whom information may be shared and their confidentiality and privacy. Applying this to Mr Green’s case, the nurse should respect his wishes to not to share information with other professionals. But ANMC [19] also emphasized that if these information have “significantly compromise or disadvantage the health or safety of the person or others” (p. 9), nurse would use their professional judgment to make decision about whether they share these information with other professionals [21]. Applying this to Mr Green’s case, although the nurse should respect his confidentiality and privacy, but Mr Green’s requirement of “keeping secret” would have negative effects (suicide) on his safety and health. Therefore, the nurse in this situation can use own judgment to decide whether they keep secret for him.

3.4. The opinion in the associated literature analyze with this case

The opinions of contemporary literature can be considered in order to further analyze the ethical dilemma from the above case. Research indicated and evaluated nurse’ feelings and attitudes when they are faced the situation similar to Mr Green’s case. Leiser et al. [22] stated over half nurses in their study expressed professional and individual ethics prevents nurses from assisting with suicide and encourages nurses to take positive action in suicide prevention. According to Sun, Long and Boore [23], nearly 40% nurses in their study insisted that “It is the professional duty of the nurse to prevent any suicidal client from dying” (p. 260). That means more nurses would take the positive actions in order to avoid suicide under both ethical and professional consideration.

Some other research emphasized that patients having suicide attempt are usually trying to get sympathy from others. They are seeking help from health care givers [24]. Therefore, nurses should provide assistance such as effective communication to resolve patients’ suicide attempt. In addition, some nurses expressed that other health care professionals such as physicians played an important role in suicide prevention; thus they should be told first when nurses noticed patient’s suicide attempt. It is obvious that the opinions from contemporary literature agreed nurses to take positive action and told other health care professionals in order to prevent suicide. In Mr Green’s case, the choice of telling others corresponds with the opinions from contemporary literature.

3.5. The ethical decision making

After consideration of all ethical principles, utilitarianism theory, value statement, legal concepts and opinions in contemporary literature, it would be neither ethically nor legally permissible for the nurse to keep the secret of Mr Green’s suicide attempt. The action of sharing this information with other professionals fits the ethical consideration of non-malefence and beneficence principle. It creates benefits for most people in this case; thus it becomes the moral right choice according to utilitarianism theory. Besides these, nursing ethical value statement emphasized nurses’ responsibility to provide quality of health care and to value access to quality nursing and health care for all people which support nurses to take positive action to avoid suicide. Moreover, the opinions in contemporary literature agreed nurses to take positive action and tell other health care professionals in order to prevent suicide which supports the choice of ‘telling others’. Therefore, the best ethical decision for the patient is that the nurse share the information of Mr Green’s suicide attempt with other health care professionals.

4. Results

In Mr Green’s case, the nursing staff made the best ethical decision for the patient. She chose to share the information of Mr Green’s suicide attempt with other health care professionals.

Once the nurse noticed Mr Green’s suicidal tendency, she provided the psychological comfort to the patient first in order to stabilize patient’s mood and prevent patient’s immediately suicidal behavior. In the meantime, the nurse manger was informed by that nurse. The nursing team which was composed with 2 nursing staff and the head nurse of the oncology department was established immediately after that. The nurse manager was the leader of this team who guided all team members’ work. She followed the self-harm and suicide protocol of the hospital strictly. In Mr Green’s situation, she divided the suicide prevention protocol into three step. At the first step—effective communication, one of the nurses continued to responsible for maintaining the effective communication with the patient, stabilizing Mr Green’s mood to prevent suicidal or self-harm behavior. This nurse also initiated an open conversation with Mr Green to identify the facts which may be precipitating thoughts of suicide. During the conversation, the nurses found that Mr Green complained repeatedly about the unbearable renal pain and his daughter have not contact with him for a long time. Therefore, the unrelieved pain and lack of family support should be two factors which cause patient’s suicidal thoughts. At that point, the nursing team initiated the second step of the suicide prevention protocol—purposeful nursing intervention. In this case, a systematic pain assessment was processed on the
patient by nursing staff and the physician was informed to adjust the pain medication for Mr Green. After the head nurse ensured that the renal pain of Mr Green was relieved gradually and the patient was on a stable mental and physical condition, the third step of the suicide prevention protocol—collaboration with other health care providers was processed. In this case, psychologist and social worker were noticed to participate in the suicide protection work. The psychologist conducted a psychological evaluation to address the other risk factors and symptoms associated with patients' suicide thoughts. And the further psychological nursing plan was made by the psychologist and nursing team. Moreover, the social worker contacted with Mr Green's daughter and arrange the family member to visit Mr Green. After the series of intervention, the Mr Green physical and emotional states were stabilized, he did not expressed any willingness to commit suicide or had any self-harm behaviors. One week later, Mr Green was transferred to a palliative care service in Brisbane, QLD, Australia. According to the follow-up visit, Mr Green passed away peacefully with his relatives and pastor's accompany.

5. Conclusion

In nursing practice, cases of patients expressing their suicide attempt or other self-harm thoughts are becoming more common. Therefore, contents regarding ethical issue such as Mr Green's case, needs to be attached great importance to. Nurses have a professional responsibilities to be aware of the moral and ethical complications which relate to their professional practice. There are some key points which ensure the ethical dilemma regard to patients' suicide attempt could be solved efficient and rational.

First, to better resolve these kind of ethical dilemmas, the assessment of patient's current situation when they make the decision is necessary. Because it helps nurses to decide if patient is competent to make the suicide decision and further consider to take the correct action to deal with the ethical dilemma.

Moreover, to better solving the case and making the best moral and ethical decision, the ethical theory, the ethical principles and the national nurses' code of ethics values statement, the associated literature relative with this case should be analyzed comprehensively before the nursing staff makes their ethical decision.

In the meantime, once the best decision is made by nursing staff, the effective response should be initiated immediately to handle patient's suicide attempt. Hospital's self-harm and suicide protocol is one of the efficient instruments for nursing staff to deal with the situation like Mr Green. It provides the guide line for nursing staff to handle the patient's suicide attempt.

In addition, collaboration with other health care providers is another key point, the other health care professionals such as psychologist, social worker and physician are able to work with nursing staff to conduct a comprehensive care plan for patient.

Author contribution

The author Jie Lin makes all contribution associated with this article. The author sets up the conception and design of the study, collect and analysis the data, drafting and finish the article, and approves the version to be submitted.

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