

# An International Consensus Definition of the Wish to Hasten Death and Its Related Factors

**Reference:** Albert Balaguer, Cristina Monforte-Royo, Josep Porta-Sales, Alberto Alonso-Babarro, Rogelio Altisent, Amor Aradilla-Herrero, Mercedes Bellido-Pérez, William Breitbart, Carlos Centeno, Miguel Angel Cuervo, Luc Deliens<sup>1</sup>, Gerrit Frerich, Chris Gastmans, Stephanie Lichtenfeld, Joaquín T Limonero, Markus A Maier, Lars Johan Materstvedt, María Nabal, Gary Rodin, Barry Rosenfeld, Tracy Schroeffer, Joaquín Tomás-Sábado, Jordi Trelis, Christian Villavicencio-Chávez, Raymond Voltz  
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## Abstract

### Background

The desire for hastened death or wish to hasten death (WTHD) that is experienced by some patients with advanced illness is a complex phenomenon for which no widely accepted definition exists. This lack of a common conceptualization hinders understanding and cooperation between clinicians and researchers. The aim of this study was to develop an internationally agreed definition of the WTHD.

### Methods

Following an exhaustive literature review, a modified nominal group process and an international, modified Delphi process were carried out. The nominal group served to produce a preliminary definition that was then subjected to a Delphi process in which 24 experts from 19 institutions from Europe, Canada and the USA participated. Delphi responses and comments were analysed using a pre-established strategy.

### Findings

All 24 experts completed the three rounds of the Delphi process, and all the proposed statements achieved at least 79% agreement. Key concepts in the final definition include the WTHD as a reaction to suffering, the fact that such a wish is not always expressed spontaneously, and the need to distinguish the WTHD from the acceptance of impending death or from a wish to die naturally, although preferably soon. The proposed definition also makes reference to possible factors related to the WTHD.

### Conclusions

This international consensus definition of the WTHD should make it easier for clinicians and researchers to share their knowledge. This would foster an improved understanding of the phenomenon and help in developing strategies for early therapeutic intervention.

### Strengths:

- Well-designed study, including an exhaustive literature review and modified Delphi process.
- Identification of criterion for level of agreement (70%) prior to data collection
- Diverse sample of experts from different countries, representing various professional disciplines, as well as both research and clinical experiences
- Good response rates over the three rounds of the Delphi process
- Detailed description of results based on the three rounds of the Delphi process

### Weaknesses:

- Relatively small sample size for the Delphi process (n=24), with 15 participants previously taking part in the nominal group experience
- Lack of experts from Asia, Africa or the Middle East

### Relevance to Palliative Care:

The concept of “wish to hasten death” (WTHD) is commonly encountered in the palliative care setting. The exclusion of euthanasia or physician-assisted suicide from the WTHD definition is an important distinction, which normalizes and validates the experiences of many patients, who may express a desire or wish for hastened death, but not necessarily request that any action be taken. The inclusion of suicidal ideation and suicide within the definition of WTHD is also important, given that severe physical illness can be a risk factor for suicide attempts. When assessing the patient’s expression of WTHD, it is equally important to rule out depression or another underlying mental disorder.