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TOP DOCTOR'S CHILLING CLAIM:

THE NHS KILLS OFF 130,000

ELDERLY PATIENTS

EVERY YEAR

by

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<http://www.dailymail.co.uk/news/article-2161869/Top-doctors-chilling-claim-The-NHS-kills-130-000-elderly-patients-year.html>

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- Professor says doctors use 'death pathway' to euthenasia of the elderly
- Around 29 per cent of patients that die in hospital are on controversial 'care pathway'
- Pensioner admitted to hospital given treatment by doctor on weekend shift



NHS doctors are prematurely ending the lives of thousands of elderly hospital patients because they are difficult to manage or to free up beds, a senior consultant claimed yesterday.

Professor Patrick Pullicino said doctors had turned the use of a controversial 'death pathway' into the equivalent of euthanasia of the elderly.

Left- Worrying claim: Professor Patrick Pullicino said doctors had turned the use of a controversial 'death pathway' into the equivalent of euthanasia of the elderly

He claimed there was often a lack of clear evidence for initiating the Liverpool Care Pathway, a method of looking after terminally ill patients that is used in hospitals across the country.

It is designed to come into force when doctors believe it is impossible for a patient to recover and death is imminent.

There are around 450,000 deaths in Britain each year of people who are in hospital or under NHS care. Around 29 per cent – 130,000 – are of patients who were on the LCP.

Professor Pullicino claimed that far too often elderly patients who could live longer are placed on the LCP and it had now become an 'assisted death pathway rather than a care pathway'.

He cited 'pressure on beds and difficulty with nursing confused or difficult-to-manage elderly patients' as factors.

Professor Pullicino revealed he had personally intervened to take a patient off the LCP who went on to be successfully treated.

He said this showed that claims they had hours or days left are 'palpably false'.

In the example he revealed a 71-year-old who was admitted to hospital suffering from pneumonia and epilepsy was put on the LCP by a covering doctor on a weekend shift.

Professor Pullicino said he had returned to work after a weekend to find the patient unresponsive and his family upset because they had not agreed to place him on the LCP.

'I removed the patient from the LCP despite significant resistance,' he said.

'His seizures came under control and four weeks later he was discharged home to his family,' he said.

Professor Pullicino, a consultant neurologist for East Kent Hospitals and Professor of Clinical Neurosciences at the University of Kent, was speaking to the Royal Society of Medicine in London.



Distressing: The professor has claimed an approved technique of looking after the terminally ill is not being used in all hospitals

He said: 'The lack of evidence for initiating the Liverpool Care Pathway makes it an assisted death pathway rather than a care pathway.'

'Very likely many elderly patients who could live substantially longer are being killed by the LCP.'

'Patients are frequently put on the pathway without a proper analysis of their condition.'

'Predicting death in a time frame of three to four days, or even at any other specific time, is not possible scientifically.'

This determination in the LCP leads to a self-fulfilling prophecy. The personal views of the physician or other medical team members of perceived quality of life or low likelihood of a good outcome are probably central in putting a patient on the LCP.'

He added: 'If we accept the Liverpool Care Pathway we accept that euthanasia is part of the standard way of dying as it is now associated with 29 per cent of NHS deaths.'

The LCP was developed in the North West during the 1990s and recommended to hospitals by the National Institute for Health and Clinical Excellence in 2004.

Medical criticisms of the Liverpool Care Pathway were voiced nearly three years ago.

Experts including Peter Millard, emeritus professor of geriatrics at the University of London, and Dr Peter Hargreaves, palliative care consultant at St Luke's cancer centre in Guildford, Surrey, warned of 'backdoor euthanasia' and the risk that economic factors were being brought into the treatment of vulnerable patients.

In the example of the 71-year-old, Professor Pullicino revealed he had given the patient another 14 months of life by demanding the man be removed from the LCP.

Professor Pullicino said the patient was an Italian who spoke poor English, but was living with a 'supportive wife and daughter'. He had a history of cerebral haemorrhage and subsequent seizures.

Professor Pullicino said: 'I found him deeply unresponsive on a Monday morning and was told he had been put on the LCP. He was on morphine via a syringe driver.' He added: 'I removed the patient from the LCP despite significant resistance.'

The patient's extra 14 months of life came at considerable cost to the NHS and the taxpayer, Professor Pullicino indicated.

He said he needed extensive support with wheelchair, ramps and nursing.

After 14 months the patient was admitted to a different hospital with pneumonia and put on the LCP. The man died five hours later.

A Department of Health spokesman said: 'The Liverpool Care Pathway is not euthanasia and we do not recognise these figures. The pathway is recommended by NICE and has overwhelming support from clinicians – at home and abroad – including the Royal College of Physicians.

'A patient's condition is monitored at least every four hours and, if a patient improves, they are taken off the Liverpool Care Pathway and given whatever treatments best suit their new needs.'

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