Letters

In search of a good death: Humanising effects of a good death will help society

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EDITOR—As part of our work to support the British government’s recent fundamental review of death certification we interviewed doctors about its processes and practice.1 We found that doctors often approached death certification as an interruption of their real work, describing the completion of a death certificate as an irritation or a necessary evil.

Research in the United Kingdom and elsewhere suggests that death certificates are not completed accurately, which is not surprising given these views. However, death certificates are important. They are used to construct meaning for relatives and, equally importantly, to construct mortality data. Mortality data inform health policy and flows of healthcare resources. Death certificates thus ensure the production of accurate health statistics, a fact rarely appreciated by doctors who complete them.

Would-be doctors and health specialists should perhaps be taught that serious and terminal illnesses are part of a single process that may lead to dying and eventually death. Dying and death are part of the real work of health care, and the best care of living people often entails acknowledging the possibility of death. Incorporating ideas and attitudes about a good death into the curriculum will have many benefits, not least that doctors would be less likely to believe that death certificates were a necessary evil.

Completing an accurate death certificate may be one of the last acts of good medical care a doctor can perform for his or her patient. It can allow the relatives and friends to understand more clearly what has happened to the person who has died, as well as allowing the best use to be made of that person’s death to improve the health of the living. The more accurate a society’s mortality statistics the better informed it is to deliver the best health care to its living members.

Footnotes
Competing interests AC and JG worked on the recently published Death Certification and Investigation in England, Wales and Northern Ireland.

References