

Using the article assigned, anything else we've read, any Googling you'd like, and your own intuitions, journal for at least one page in response to the questions below. Your assigned questions are based on your last name. The case study is designed to complement those in Mappes and Zembaty's piece, and you may fill in other details based on similar situations you might have experienced or read about.

Case Study:

A 67-year-old woman has been sick with cancer for a few years. A new kind of surgery is available to her that has the potential to prolong her life by removing most of the tumors that other treatments could not—a surgery that was not available until recent advances in methods. However, it is experimental and would likely entail additional medications that may make her feel a little unwell for the remainder of her life. Despite those challenges, it would also very likely prolong her lifespan (approximately 8 years or more). Her family would like her to get the surgery. But, she would prefer simply a course of medications that will ease her pains, having already exhausted other options to get rid of it. This will result in a much shorter projected lifespan (one year at most). Her family wants to invoke proxy care privileges because they fear the woman is not in her right and normal state of mind. They have observed both fear of the surgery and forgetfulness (which they attribute to early-onset dementia) and worry that she is unable to make a good, rational decision for herself in her current condition. Her decision to discontinue treatments is inconsistent with her life-long attitude and other choices. They worry that her aging mind, along with her extreme fear, are influencing her decision inordinately. The patient says that she simply wants to be done with aggressive treatments, claiming that she is tired and ready for the end. Doctors observe indications that the patient may be afraid and that she is likely experiencing early stages of dementia, but the situation is borderline. They worry about what it means for the patient to be autonomous in this situation and to what extent listening to the family might constitute coercion, if at all.

Last names A-I: Imagine that you are the patient and/or the patient's supportive friends. What are you experiencing? Go through the five senses, as well as your emotional state. What thoughts are going through your mind? Why do you/your friend not want the surgery? Why do you think a shorter life on medication is better than a potentially longer one following surgery? Why is your argument stronger than the family's view (as you anticipate them to be)?

Last names J-Z: Imagine that you are the patient's family. What are you experiencing? Go through the five senses, as well as your emotional state. What thoughts are going through your mind? What responsibilities do you think you have to someone who does not seem to be her normal self, anymore? Why do you think the patient's argument for medication over surgery is wrong? Why is your argument stronger than the patient's and her friends' arguments (as you anticipate them to be)?