

Medical assistance in dying (MAID) data update

Updated March 13, 2017

Medical assistance in dying (MAID) data is broken up into two sections.

Section one includes cumulative provincial and zone data. This data is updated on a **weekly** basis.

Section two includes average age of patients, number of people who did not meet federal mandatory eligibility criteria, number of patients transferred from a non-AHS facility, and most cited health conditions. This data is updated on a **monthly** basis.

This data is provided by the MAID navigators from each zone and is the only MAID data to be referenced by AHS, with media or general public.

AHS Communications will update this data and share with appropriate individuals every Monday.

Section One (current as of March 13, 2017)

Since February 6, 2016, when court orders made medically-assisted death possible, Alberta Health Services has provided medical assistance in dying to 97 patients.

Six of those deaths occurred between February 6, 2016 and June 17, 2016, when federal legislation removed the need to attain a court order prior to undergoing medical assistance in dying.

Medical Assistance in Dying Activities			
Zone	Total	Facility	Community
South	11		
Calgary	29		
Central	9		
Edmonton	42		
North	6		
TOTAL	97	68	29

Section Two (Current as of January 31, 2017)

There have been **48** people who have not met the federal criteria across the province to receive medical assistance in dying.

Some ineligibility reasons include:

- mental health diagnosis
- loss of capacity or competency
- death is not reasonably foreseeable

The most cited health conditions to date:

- cancer
- multiple sclerosis (MS)
- amyotrophic lateral sclerosis (ALS).

The average age of people receiving this service

- South: 65
- Calgary: 73
- Central: 88
- Edmonton: 67
- North: 63

Number of patients transferred from faith-based or non-participating sites

- 16 patients in total have been transferred
- 13 patients have been transferred from faith-based facilities
- 3 patients have been transferred from non-faith-based facilities to either a participating facility (AHS) or to the patient's home to receive medical assistance in dying.