



המכון הלאומי לחקר שרותי הבריאות ומדיניות הבריאות (ע"ר)  
The Israel National Institute for Health Policy Research

**International Workshop:**

**“Death is Inevitable - A Bad Death is not”**

**July 4 - 5, 2018, Caesarea**



The Israel National Institute for Health Policy Research

**International Workshop**

# **Death is Inevitable - A Bad Death is not**

**Chair: A. Mark Clarfield**

**July 4-5, 2018  
Caesarea , Israel**

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**International Workshop**  
**Death is Inevitable - A Bad Death is not**  
**Wednesday-Thursday, July 4-5, 2018, Dan Caesarea Hotel**

Wednesday, July 4<sup>th</sup>, 2018

09:00-09:30 *Gathering & Welcome Coffee*

**09:30-10:00 Opening session and Greetings**

**Chair:** A. Mark Clarfield, *Ben-Gurion University*  
**Moshe Bar Siman Tov**, *Director General, Ministry of Health*  
**Orly Manor**, *Chair, Board of Directors, NIHP*  
**Pesach Shvartzman**, *Israel Palliative Medicine Association*  
**Tikva Meron**, *Tmicha - The Israeli Association of Palliative Care*

**10:00-11:30 Session 1: From whence have we come; to where we (might) be going**

**Prof. Baroness Ilora Finlay, UK** - *House of Lords*  
**A short history of palliative care**  
**Dr. Daniel Sulmasy, US** - *Georgetown University*  
**Spiritual dimensions in the practice of palliative medicine**  
**Discussant: Tikva Meron, Tmicha**

11:30-11:45 *Coffee break*

**11:45-13:00 Session 2 : Clinical case 1**

**Chair: Charles Sprung, Hadassah**  
**Small Group Leaders:**  
**Charles Sprung, Hadassah, Sandy Buchman, University of Toronto,**  
**Ilora Finlay, House of Lords, Rotem Telem, Sourasky Medical Center**

13:00-14:00 *Lunch*

**14:00-15:00 Session 3: To tell you the truth...or not**

**Chair: Shai Brill, Bet Rivka Hospital**  
**Ora Paltiel, Hadassah**  
**Discussant: Nathan Cherny, Shaare Zedek**

**15:00-16:00 Clinical case 2**

**Chair: Adir Shaulov, Hadassah**  
**Small Group Leaders:**  
**Adir Shaulov, Hadassah, Daniel Sulmasy, Georgetown University,**  
**Gil Siegal, Ono Academic College, Jiska Cohen-Mansfield, Tel-Aviv University**

16:00-16:30 *Coffee Break*

**16:30-18:00 Session 4 : Approach to end of life: The three Abrahamic religions  
(Judaism, Christianity and Islam)**

**Chair: Shimon Glick, Ben-Gurion University**  
**Ben Corn, Shaare Zedek**  
**Kassim Baddarni, Al-Taj For Health and Heritage**  
**Daniel Sulmasy, Georgetown University**

**19:30-21:30 Dinner & Evening Program**

**Henrique Cymerman**  
**The tsunami of the Middle East-strategic challenges for Israel**

Thursday, July 5<sup>th</sup>, 2018

**08:30-09:30** Session 5: There's no place like home, there's no place like home: Care in the community

**Chair:** Zamir Halpren, *Scientific Director, NIHP*

**Dr. Sandy Buchman, Canada** - *University of Toronto*

**Building palliative care services in the community - progress and challenges**

**Discussant:** Yoram Zinger, *Ben-Gurion University*

**09:30-10:30** Session 6: Children are not little adults: Pediatric Panel discussion

**Chair:** Pesach Shvartzman, *Israel Palliative Medicine Association*

**Yael Bengal, Schneider**

**Sergey Postovsky, Rambam**

**Leeat Granek, Ben-Gurion University**

**Lynne Halamish, INPACT**

*10:30-11:00* Coffee Break

**11:00-12:00** Session 7: Here comes the judge

**Panel on Law of the Dying Patient : A help or hindrance?**

**Chair:** Ofra Golan, *Center for Academic Studies, Or Yehuda*

**Avraham Steinberg, Shaare Zedek**

**Aryeh Ben-Yehuda, Hadassah**

**Maya Peled- Raz, Haifa University**

**12:00-13:00** Session 8: The National plan of palliative care & end of life

**Panel Chair:** David Chinitz, *Hebrew University*

**Irit Laxer, Ministry of Health**

**Charles Sprung, Hadassah**

**Irit Fischer, JDC Israel Eshel**

*13:00-14:00* Lunch

**14:00-15:00** Session 9: The challenges of advanced directives

**Chair:** Dorit Shaham, *Hadassah*

**Shelley Sternberg, Ministry of Health**

**Shai Lavi, Van Leer Jerusalem & Tel-Aviv University**

**Estelle Rubinstein, Hadassah**

**15:00-16:00** Closing Session: Wrap up and audience participation

**Chair:** A. Mark Clarfield, *Ben-Gurion University*

**Iris Rasooly, Ministry of Health**

**Baroness Ilora Finlay, House of Lords, UK**

**Daniel Sulmasy, Georgetown University, US**

**Sandy Buchman, University of Toronto, Canada**

*Coffee to Go...*

**Dear Colleagues,**

On behalf of the NIHP it gives me great pleasure to welcome you to this important meeting. As the title of the conference implies, while death is inevitable, a bad one is not.

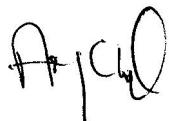
As you may know, the Institute is charged with assessing the functioning of the National Health Insurance Law; as such, the overarching purpose of this meeting is to consider policy implications for the relevant authorities in Israel, mainly but not exclusively, the Ministries of Health and Finance, the four health funds as well as academia. As such, the choice of you, our local invitees, largely reflects this goal.

We are also privileged to have with us three international experts, one each from the UK, Canada and the US all of whom have extensive experience in the relevant fields. We look forward to hearing from them, learning from their experience and to meeting and talking with them throughout the next two days of the meeting.

Although we have produced an integrated and wide ranging program of speakers with the help of our scientific advisory committee, we have built the two days around maximum audience participation. I hope you will all take advantage of this design.

Our situation at this beautiful hotel, overlooking as Homer put it so evocatively, the wine dark Mediterranean Sea and in the historic city of Caesarea should make this task an easy one and despite the sober nature of our deliberations, I hope it will be fun as well.

**Welcome to you all!**



***Prof. A. Mark Clarfield***  
***Workshop Chair***

## List of Speakers & Chairpersons

<b>Mr. Kassim Baddarni,</b>	Al-Taj for Health and Heritage.
<b>Mr. Moshe Bar Siman Tov,</b>	Director General, Ministry of Health.
<b>Mrs. Yael Bengal,</b>	Schneider Children's Medical Center of Israel.
<b>Prof. Aryeh Ben-Yehuda,</b>	Hadassah University Hospital.
<b>Dr. Shay Brill,</b>	Director, Beth Rivkah geriatric medical center.
<b>Prof. Nathan Cherny,</b>	Director, Cancer Pain and Palliative Medicine Service Dept Medical Oncology, Shaare Zedek Medical Center.
<b>Prof. David Chinitz,</b>	School of Public Health, Hebrew University & Hadassah ,Jerusalem
<b>Prof. A. Mark Clarfield,</b>	Head, Medical School for International Health, Ben-Gurion University, Workshop Chair.
<b>Prof. Jiska Cohen-Mansfield,</b>	Department of Health Promotion - School of Public Health & Director, Minerva Center for Interdisciplinary Study of End of Life, Tel-Aviv University.
<b>Dr. Ben Corn,</b>	Interim Director of the Cancer, Shaarei Zedek Medical Center.
<b>Mrs. Irit Fischer,</b>	Joint - Eshel - Israel.
<b>Prof. Shimon Glick,</b>	Former head of the Moshe Prywes Center for Medical Education & acting head of the Lord Rabbi Immanuel Jakobovits Center for Jewish Medical Ethics, Ben Gurion University. Former Ombudsman, Ministry of Health.
<b>Dr. Ofra Golan,</b>	The Center for Academic Studies, Or Yehuda & The Academic College of Israel, Ramat-Gan.
<b>Dr. Leeat Granek,</b>	Senior Researcher.
<b>Prof. Zamir Halpren,</b>	Scientific Director, NIHP.
<b>Prof. Shay Lavi,</b>	Director, Van Leer Jerusalem Institute & Prof. of Law, Tel Aviv University.
<b>Dr. Irit Laxer,</b>	Ministry of Health.
<b>Mrs. Lynne Halamish,</b>	Instructor, INPACT - Israeli National Palliative Care Training program.
<b>Prof. Orly Manor,</b>	Chairwoman, Board of Directors, NIHP & Prof. of Biostatistics, the Hebrew University-Hadassah.
<b>Mrs. Tikva Meron,</b>	TMICHA & Shebe Medical Center.
<b>Prof. Ora Paltiel,</b>	Director, Braun School of Public Health and Community Medicine, Hadassah- Hebrew University.
<b>Dr. Maya Peled-Raz,</b>	School of Public Health, University of Haifa, Chair of the Ethics Committees, Bnei Zion Medical Center & Galilee Medical Center.
<b>Dr. Sergey Postovsky,</b>	Senior Deputy Director, Rambam Medical Center.
<b>Mrs. Estelle Rubinstein,</b>	Hadassah University Hospital.
<b>Dr. Iris Rasooly,</b>	Head, Geriatric Community Services Department, Geriatric Division, Israel Ministry of Health & Hadassah-Hebrew University.
<b>Prof. Pesach Shvartzman,</b>	Pain and Palliative Care Unit, Family Medicine Department, Faculty of Health Sciences; Ben-Gurion University of the Negev.

## International Workshop

- Prof. Dorith Shaham,** Head, 'Adam veRefuah' Program of Medical Humanities, School of Medicine, Hadassah-Hebrew University.
- Dr. Adir Shaulov,** Hadassah Medical Center - Ein Kerem.
- Dr. Gil Siegal,** Director, Center for Health Law and Bioethics, Ono Academic College & Professor of Law, University of Virginia School of Law.
- Prof. Charles Sprung,** Director Emeritus, General Intensive Care Unit in the Department of Anesthesiology and Critical Care Medicine, Hadassah Hebrew University Medical Center.
- Prof. Avraham Steinberg,** Rabbi Prof Avraham Steinberg, Medical Ethics, Hebrew University-Hadassah Medical School.
- Dr. Shelley Sternberg,** Director of Geriatrics in the Acute Care Setting, Geriatric Division, Ministry of Health.
- Dr. Rotem Tellem,** Geriatrician and Head of Palliative Care, Tel-Aviv Sourasky Medical Center.
- Dr. Yoram Zinger,** Ben Gurion University.

# **Abstracts**

## **In Order of Appearance**

## A Short history of palliative care

### Prof. Baroness Ilora Finlay

Cicely Saunders is the undoubted founder of the modern hospice and palliative care movement. Having trained in nursing and in social work before that, she became a doctor, determined to improve the care of those at the most vulnerable time in their lives – when dying.

One aspect important to her was the importance of establishing a scientific foundation for all that we do to relieve distress, to understand the nature of the pathophysiology of symptoms and to find solutions to problems previously viewed as intractable.

Since then bioethics as a discipline has increasingly emerged as a force to challenge conventional thinking. Today the major challenges facing palliative care include:

- ◆ Being recognised as a distinct medical specialty with a unique skill set that can teach other disciplines and must be integrated with other medical disciplines in order to deliver the best care for patients and families
- ◆ The myths around analgesia that suggest that opioids are dangerous, resulting in the under-treatment of pain
- ◆ The increasingly unrealistic expectations in society of what medicine can and cannot achieve
- ◆ Poor listening skills in professionals who find it difficult to abandon their previous sincerely made decisions and beliefs
- ◆ Failure of policy makers to recognise the economic evidence supporting greater palliative care investment
- ◆ Difficulties in accepting death as an inevitable part of life
- ◆ Clinicians difficulties in differentiating the cessation of futile interventions from medical acts of medical killing
- ◆ Pressures from new therapies and those with a financial interest in promoting them to continue treatment in the face of futility
- ◆ The counter pressures in some wealthy societies for physician assisted suicide and euthanasia
- ◆ The rudimentary nature of basic medical care in many parts of the world, creating wide differences in survival and overall outcomes of disease, which is in itself a threat to world peace
- ◆ The large numbers of bereaved children who carry their trauma and loss into all that influences their adult lives

## Spiritual dimensions in the practice of palliative medicine

**Dr. Daniel Sulmasy**

Questions of meaning, value, and relationship arise inevitably for patients facing serious illness and death. These are spiritual questions, arising for persons of all faiths and of no faith. Dr. Sulmasy will define spirituality and religion, noting how these concepts differ and how they overlap. He will (1) link questions of meaning with the concept of hope, (2) questions of value with the concept of dignity, and (3) questions of relationship with the concept of reconciliation. He will discuss the differences between spiritual needs and religious coping, and describe what role clinicians ought to play in addressing the spiritual needs of dying patients, and describes what spiritual care tasks ought to be reserved for chaplains and clergy. He will end by noting that clinicians can best attend to the spiritual needs of patients by attending to their own spiritual lives.

## To tell you the truth...or not

Prof. Ora Paltiel

Truth-telling is an essential value in human discourse, and commitment to honesty with patients is recognized as one of the core responsibilities of physicians and an integral aspect of professionalism. However, it has long been recognized that telling the truth regarding diagnosis and prognosis may at times cause harm, and thus may run counter to our therapeutic aims. Through the use of a narrative, historical as well as cross-cultural perspectives, I will explore the dilemmas involved in truth-telling and the evolution from paternalistic to autonomous care paradigms which culminate in today's ethos of shared decision-making and "offering" truth.

## Existentialism: Ancient Jewish Roots and Modern Medical Application

Dr. Ben Corn

Western medicine is frantically racing to confront the realities of frailty, decline and mortality. A deep void of knowledge exists because aging, as a didactic subject, has been systematically ignored in formal medical education. Existential thought has ostensibly arisen as a modern means of dealing with the tension between the inevitability of death and the wish to continue to enjoy life (I. Yalom, 1980). Within existentialism, there is ultimately no core conflict because death serves as a catalyst to optimize the quality of the human experience.

Professor Corn will argue that an existential approach to life, as carried out by the ancient patriarchs and prophets, was embedded in the Jewish Scriptures. He will discuss how two tools (The Conversation Project; Hope Enhancement Therapy) can be used to restore such an existential worldview and thereby enhance life quality and well-being for those who are dying.

## Good Death in View of Islam

### Mr. Kassim Baddarni

Death: Islam holds life as sacred and very valuable; belonging to God and that all creatures will die one day "Every soul shall have the taste of death" (Quran 29:57), in the time and place predetermined by God. Suicide, assisted suicide and active euthanasia are strictly forbidden by Islamic law. Death is only a transition between two different lives, the existence short life and the forever life in paradise/hell.

Good Death: Muslims prefer to die at home, surrounded by relatives and friends, reading chapters from the Quran and making supplications to God for patient's forgiveness. Family should encourage the dying Muslim to recite and confess his faith: "There is no God but Allah and Muhammad is his messenger". Death occurs when the spirit leaves the body. It is well recommended that the patient while dying, to face Mecca. Muslims are willing to die in a holy place (such as Mecca or Medina in Saudi Arabia) or during a holy time (such as Friday or the fasting month of Ramadan).

After Death: The face should be turned toward Mecca, arms and legs should be straightened with toes tied together by a thread. The mouth and eyes are closed. Clothes should be removed by a person of the same gender, the body covered with a clean sheet. Muslim rituals includes washing the body, shrouding with white sheets, praying and burial in a deep grave, on the right side facing Mecca. Muslims are always buried, never cremated.

Medical Considerations: The medical team should be sensitive and fully respectful to other faith and culture. Never speculate, when in doubt, ask patient or family. Cultural and religious competences will improve communication and decrease the potential for conflict. Consider palliative care and spiritual support to the Muslim patient, maintaining a terminal patient on artificial life support for prolonged periods is not accepted. When death occurs, prompt issuance of the death certificate will allow the burial as soon as possible, in keeping with Islamic law.

## **Building Palliative care services in the community - progress and challenges**

**Dr. Sandy Buchman**

Western developed countries face a tsunami of an aging population requiring not only management of multiple chronic co-morbidities, but an imperative to address their palliative healthcare needs as they approach the last phase of life. As well, compassionate societies must provide children, youth, young and middle-aged adults around the world living with life-limiting illnesses with high quality, person/family-centred cost-effective palliative and end-of life care.

In Canada's publically funded universal healthcare system, the province of Ontario has faced many challenges to ensuring equitable, integrated access to palliative and end-of-life care for patients and their families. Identified gaps in care include lack of support for caregivers in the community, poor accountability for delivery and a lack of integration across the health system. The task at hand was to build and promote an integrated palliative care health system that would provide the highest quality care that is continuous across all settings, sustainable, equitably accessible and person-centred. In March of 2016, the Ontario Palliative Care Network (OPCN) was launched. This new approach to integrated palliative care delivery can serve as an example of how to build palliative care services in the community for millions across a large geographical jurisdiction.

This presentation will also describe how palliative and end-of-life care may be efficiently and effectively delivered to the majority of the population who prefer to receive their care in their homes and local communities, emphasizing how critical it is to build primary care and inter-professional capacity to achieve this objective. Finally, the achievement of the objective of fully integrated palliative care requires a culture and mindset shift for both society in general and healthcare providers in particular to appreciate the importance of fully integrated palliative and end of life care.

## **Children are not Little Adults: Pediatric Panel Discussion**

**Prof. Pesach Shvartzman, Mrs. Yael Bengal, Dr. Leeat Granek,  
Dr. Sergey Postovsky, Mrs. Lynne Halamish**

In this session, our multidisciplinary group will give a brief overview of pediatric epidemiology and intervention at the end of life. Included will be current practice in Israel and models of palliative care to children at the end of life in Israel and abroad.

We will also address briefly staff dilemmas and challenges in caring for children at end of life, the persona and professional impact of working with children at the end of life on healthcare professionals, and communication issues between staff, between staff and families and between staff and families and the dying child.

There will be time set aside for questions following these short overviews.

## The Dying Patient Act in practice

**Dr. Maya Peled-Raz**

In this presentation I will describe the findings of a recent study, conducted by Karako-Eyal, Gilbar and Peled-Raz, using face-to-face, semi-structured qualitative interviews with doctors who provide advice and treatment to dying patients. The study firstly examines whether the bioethical principles set in the Dying Patient Act and the decision-making process it establishes are applied in practice by doctors, when treatment decisions regarding dying patients are required, and then examines physicians' knowledge of the law as well as their concurrence with its ethical premises.

The study's findings indicate that there are gaps between physicians' conduct and the decision-making process set by the Act. The main reason for these gaps is that doctors are influenced by several factors, when they are involved in end-of-life decision making - of which the legal framework is only one factor. Another important finding is that physicians' conduct reflects more of a relational autonomy approach which is dissimilar to the individualistic approach at the base of the Act.

I will contend that the study indicates both a need to rectify the Act and to provide better education and skills to doctors in this important area.

## **Israel National Palliative Care and End of Life Program of the Ministry of Health**

**Prof. Charles Sprung, Dr. Irit Laxer, Mrs. Irit Fischer**

The National Palliative Care and End of Life Program began in 2017. The program has several key components including: training, models and standards, ethics, research, awareness and rights and eligibility. Several components have commenced and several will start shortly. Each of the components will be briefly described. The session will also provide a question and answer period with interaction and feedback that will hopefully help to improve the program.

## Personal Perspective

### Dr. Iris Rasooly

Presenting a personal perspective of caring for a dying elderly mother. Some of the issues to be discussed: The clash of a strong personality with impending death and conflictual wishes, the gift of the guidance and support of the treating physician, the interaction with healthcare system – and the family amidst it all.

# **Biographies**

## **In alphabetical order**



**Mr. Kassim Baddarni**

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Founder and Director:

Al-Taj for Health and Heritage Organization (since 2005). Al-Taj Mission: to promote health by raising awareness for prevention, early detection and to improve the management of cancer and diabetes in the Arab sector, Israel.

Experience:

- 07/05 - Present Present Founder & Director, Al-Taj for Health and Heritage Organization.
- 01/07 - 06/07 Regional Operations Manager, Children of Peace, UK.
- 03/03 - 05/05 Branch Manager, Tophouse Marketing.
- 08/01 - 03/03 Registered Nurse, Yifat Kibbutz.
- 07/00 - 03/01 Marketing Manager, E-Med Medical Web Site, Kefar-Saba.
- 10/88 - 04/00 Product Manager, Rafa Laboratories, Jerusalem.
- 05/86 - 09/88 Deputy Charge Nurse, Cardiology Unit, Carmel Hospital, Haifa.
- 01/83 - 12/85 Registered Nurse, Coronary Care Units, Perth & Sydney, Australia.
- 10/77 - 04/82 Registered Nurse, CCU, Hasharon Hospital, Petach-Tiqva.

Committees:

- 12 - Present Member, Promoting Multi-Cultural Spiritual Care in Galilee Forum.
- 99 - 00 Member, Employees' Committee, Rafa Laboratories.
- 94 - 95 Member, Health Committee, Arraba Local Council.
- 90 - 93 Board Member, Galilee Society for Health Research and Services.
- 88 - 92 Director, Arraba Almostakbal Association, Arraba.
- 97 - 00 Member, New York Academy of Science.



**Mr. Moshe Bar Siman Tov**

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Director General, Israeli Ministry of Health since July 2015.

- August 2014 - June 2015 - Economic Attaché (Israeli Ministry of Finance), Embassy of Israel, Washington, D.C., USA. Head of Ministry of Finance's Economic Delegation to the United States.
- July 2014 - February 2010 - Deputy Budget Director, Israeli Ministry of Finance (from November 2013 - Senior Deputy Director).
- June 2008 - February 2010 - Healthcare coordinator at the Budget Division, Israeli Ministry of Finance.
- June 2006 - June 2008 - Social Affairs and National Insurance Coordinator at the Budget Division, Israeli Ministry of Finance.
- June 2006 - September 2003 - Referent for Employment and Social Affairs in the Budget Division, Ministry of Finance.

Education:

- 1999-2002 - BA in Economics and Business Administration from the Hebrew University of Jerusalem.
- 2002-2004 - MA in Economics and Business Administration, specializing in finance, the Hebrew University of Jerusalem.



**Mrs. Yael Ben-Gal**

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Coordinator and Head of Palliative Care Services – Schneider Children’s Medical Center of Israel (from 2016)

Palliative-supportive care specialist nurse

Head of palliative end of life team in the Hemato-Oncology department

Coordinator of sexuality topics and activities among young and adolescent patient.

In charge a unique education program to the staff, nurses and students training nurse in school and advance oncology courses.

Promotes the knowledge in pediatric oncology and supportive care, in nursing school lectures at and advanced oncology courses.

Education:

M.H.A degree, Ben Gurion University of the Negev: Master Health Administration studies

MA degree, Ben Gurion University of the Negev: clinical nursing studies, oncology stream.

RN BA degree, Hadassah School of Nursing, Jerusalem, branch of the Kaplan Nursing School, Rehovot

Graduate Advance Oncology Course and Advance Intensive Care Course for Children and Newborn Premature Infants

Member of Professional Societies:

Israel Nurses Union Oncology Nursing Society- Board member, Israeli Suppurate and Palliative-Care Society

ISNCC (International, Society Nursing of Cancer Care) - Board member, Chair of Policy & Advocacy committee



**Prof. Arie Ben Yehuda**

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MD

Prof. Ben Yehuda is currently the chairman of the department of medicine at the Hadassah and Hebrew University (UH) Medical Center, and the director of the Division of internal medicine.

Prof. Ben Yehuda got his M.D degree from the HU in Jerusalem, and completed his residency in internal medicine at Hadassah.

Later, he did a clinical and research fellowship in geriatrics and gerontology at the medical school of Cornell University.

Prof. Ben Yehuda's areas of interest and research include the changes of the immune system that occur with age and the interplay between Aging cancer and senescence.

His clinical activities include the treatment of elderly persons with various geriatric syndromes, and applying patient safety into the routine of patient care in the hospital.

Prof. Ben Yehuda is a member of the Israeli Program of Quality Measures in the Community for the Israel Ministry of Health.



**Dr. Shai Brill**

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Director of Beth Rivkah geriatric medical center, of Clalit health services.

From 1998 - 2017

head of the advisory Committee for development of services for disabled elderly, the National Insurance Institute.

From 2002 until 2006,  
Since 2012

Chairman of the Israeli Society of Geriatric Medicine.

managing partner of Minerva Center for the Interdisciplinary Study of End of Life, Tel Aviv University.

Graduate of Sackler School of medicine, Tel Aviv University in 1977.

Specialist in Internal Medicine and Geriatrics since 1989.

Main research area - rehabilitation of elderly hip fracture patients, burnout and compassion fatigue among medical staff in post-acute care.



**Dr. Sandy Buchman**

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MD CCFP (PC) FCFP

Dr. Sandy Buchman is an Associate Professor in the Department of Family and Community Medicine at the University of Toronto and practices palliative medicine providing home based palliative and end of life care with the Temmy Latner Centre for Palliative Care, Sinai Health System in Toronto.

He also serves as a palliative care physician through the Palliative Care and Education for the Homeless (PEACH) program out of Inner City Health Associates in Toronto.

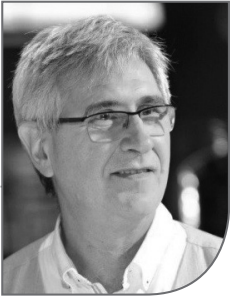
He practiced comprehensive Family Medicine for many years with special interest in Primary Care Cancer Care, Palliative Care, HIV/AIDS and Global Health - including volunteer experiences in South America and Africa.

He currently serves as the Medical Lead for groups working to build two new residential hospices in Toronto, including a hospice for the homeless.

His academic interests include the Integration of Primary Care/Cancer Care, Primary Care/Palliative Care and the Social Accountability of Medicine.

He was President of the College of Family Physicians of Canada in 2011-2012 and the Ontario College of Family Physicians in 2005-2006.

In August 2018 he will become the President-elect of the Canadian Medical Association.



**Prof. Nathan I Cherny**

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MBBS, FRACP, FRCP

Director, Cancer Pain and Palliative Medicine Service  
Dept Medical Oncology, Shaare Zedek Medical Center

#### Education

He was born in Melbourne, Australia in 1958, where he was raised and educated. He studied medicine at Monash University Medical School where he graduated in 1983 with high distinction.

#### Advanced Training

He completed his Fellowship of the Royal Australian College of Physicians attaining specialist recognition in both Oncology and Palliative Medicine. During that time he established the undergraduate training program in palliative care at Monash University. 1991–1994 he completed a (very prolonged) fellowship in Cancer Pain and Palliative Medicine at Memorial Sloan Kettering Cancer Center, New York, where he worked with Kathleen Foley and Russell Portenoy.

#### Appointments

In 1994 Dr Cherny joined with Prof Raphael Catane to establish the Oncology and Palliative Medicine Unit at the Shaare Zedek Hospital in Jerusalem. The model and standards for integrated oncology and palliative care developed by Prof Cherny and Prof Catane have since served as the basis for the designation criteria for the ESMO Designated Center program in Integrated Oncology and Palliative Care. He continues to head the Multidisciplinary Cancer Pain and Palliative Medicine Service at Shaare Zedek Medical Center, and, in addition, he maintains an active practice in general oncology.

In 2008–9 he was visiting scholar to the Dept of Bioethics at the National Institutes of Health (NIH) in Bethesda Maryland. Since 2011 he also chairs the board of the NPO B'Ruach (By Spirit) for the promotion of professional chaplaincy in Israel.



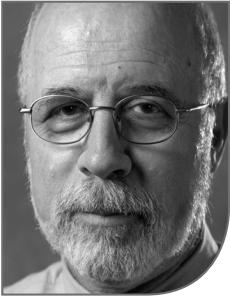
**Prof. David Chinitz**

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David Chinitz holds a PhD in Public Policy Analysis from the University of Pennsylvania and is a Professor of Health Policy and Management at the School of Public Health of the Hebrew University and Hadassah in Jerusalem.

His research and publications are in the areas of comparative health system reform, health care priority setting, management of cancer services, mental health policy, and the impact of quality improvement programs at the level of front line staff in community and hospital settings.

He has consulted for the World Health Organization, and served as President of the International Society for Priority Setting in Health Care, and Chair of the Scientific Advisory Board of the European Health Management Association, as well as serving on the editorial advisory boards of Health Economics, Policy and Law and the Israel Journal of Health Policy Research. During academic year 2016-17 he is a Visiting Scholar at the Wagner School of New York University.



### **Prof. A. Mark Clarfield**

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Prof. Clarfield received his MD from the University of Toronto in 1975 going on to specialize in Family Medicine, Community Medicine and finally in Geriatrics.

Moving to Montreal he was with the Faculty of Medicine at McGill University from 1978 -1992: head of the University Division of Geriatric Medicine and Assistant Dean (1989-92). There he reached the rank of Professor.

In 1992, he moved to Israel.

From 1994-2001 he was Head of the Division of Geriatrics at the Ministry of Health, then Head of Geriatrics at the Soroka Hospital (2001-2013) and Sidonie Hecht Professor of Geriatrics at Ben-Gurion University.

From 2009- present he is the head of Ben-Gurion University Medical School for International Health. Dr. Clarfield's research interests include Alzheimer disease and the related dementias, the organization of health care services, medical history and ethics.

As well, he publishes medical humour, book reviews and miscellaneous pieces in various newspapers. A bit of a journalistic nudnik, he has published many letters to the editor in publications around the world. He also enjoys performing with his folk music band "The Unstrung Heroes".

### **Prof. Jiska Cohen-Mansfield**

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Jiska Cohen-Mansfield is a Professor at the Department of Health Promotion at the School of Public Health and the director of the Minerva Center for Interdisciplinary Study of End of Life at Tel-Aviv University.

She is the Igor Orenstein Chair for the Study of Geriatrics at Tel Aviv University Medical School. Prof. Cohen-Mansfield's work focuses on understanding persons with dementia, their needs and their care, on loneliness in older person and its prevention, and on end of life, its characterization and potential for improvement.

She has published over 350 publications in scientific journals and books, for which she is a highly cited researcher as listed by the ISI.

She has developed a number of assessment tools and treatment approaches which are used internationally.

Prof. Cohen-Mansfield has received multiple professional awards, including the Busse Research Award, Barry Reisberg Award for Alzheimer's Research, Pfizer Quality Improvement Award, Psychologists in Long-Term Care Outstanding Contribution Award, Powell Lawton Distinguished Contribution Award in Applied Gerontology, the International Psychogeriatric Association 2015 Award for Distinguished Service to the Field of Psychogeriatrics, the 2018 Distinguished Scientist Award of the American Association of Geriatric Psychiatry and fellowships in the Gerontological Society of America and the American Psychological Association.

Her studies have been replicated by investigators around the world. Furthermore, the knowledge and materials developed are being used by both clinicians and researchers internationally.



### **Dr. Ben Corn**

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Ben Corn is a graduate of the accelerated BA/MD track at Boston University, an elite program that condenses collegiate and medical education. He trained in Oncology at the University of Pennsylvania where he was Chief Resident and later Assistant Professor. He moved on to Fox Chase Cancer Center where he was appointed Associate Member and then served as Vice Chairman and Full Professor of Oncology at Jefferson Medical College before emigrating from the United States. He won the teaching award at each of these respective institutions. At the age of 36, he made aliyah with his family. Upon landing in Israel, he was infected by start-up nation and became CEO of Keryx Biopharmaceuticals which he led to an IPO on the NASDAQ and London AIM stock exchange.

In 2003, he re-entered clinical medicine as Chairman of the Institute of Radiotherapy at Tel Aviv Medical Center (Ichilov). While at Ichilov, he convinced the NCI to globalize the Radiation Therapy Oncology Group and, quickly, Ichilov became the first international member of the RTOG. He has served as Chairman of the Brain Tumor Committee of the RTOG and his research has included diverse topics such as integrating radiotherapy and chemotherapy for glioblastoma, dose de-intensification strategies for Primary CNS Lymphoma and protection of the hippocampus in the setting of brain metastases. He has authored over 200 articles and chapters in the medical literature (including New England Journal of Medicine, JAMA, Lancet) and nearly 100 essays in the popular literature (including the Wall Street Journal, St Louis Post-Dispatch and The Atlantic). He is currently the Interim Director of the Cancer at Shaarei Zedek Medical Center in Jerusalem. He is now the Principal Investigator on two prospective international protocols sponsored by the National Institutes of Health (NIH) that are designed to determine the center of hopefulness in the brain.

In addition to his work as a cancer physician, Ben co-founded (with his wife Dvora) the NGO known as Life's Door. The organization has offered workshops to over 10,000 cancer patients and their families who are in need of coping tools and emotional support that is rarely provided by the Israeli healthcare system. For these efforts, he was awarded the Citation for Volunteerism by President Shimon Peres in 2012 and the Builders of Zion prize in 2017.



**Prof. Baroness Ilora Finlay of Llandaff**

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FRCP, FRCGP, FMedSci, FHEA, FLSW, FCEM

Professor of Palliative Medicine, Cardiff University; established the Diploma/MSc in Palliative Medicine; lead for Palliative Care in Wales 2008–2017 to ensure 7-day specialist services with 24/7 advice, and national standards for specialist palliative care service delivery.

She is President of the Chartered Society for Physiotherapy; Vice President of Hospice UK and of Marie Curie Care. Past-President of BMA, RSM and Association for Palliative Medicine.

Chairs the National Mental Capacity Forum for Ministry of Justice and Department of Health.

Became a life-Peer in 2001, served on Select Committee on Assisted Dying for the Terminally Ill. Co-Chairs think-tank Living and Dying Well.

A Deputy Speaker in House of Lords.

Welsh Woman of the Year 1996–97 and has held Visiting Professorships in the Netherlands and Australia. 2008 'Woman Peer of the Year; 2007 Parliamentary Charity Champion. 2014 Welsh Livery Guild Lifetime Achievement Award.



**Mrs. Irit Fischer**

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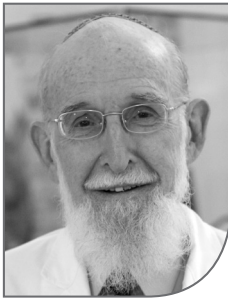
Manager of programs in the field of Gerontology  
manager of the Palliative unit, Joint - Eshel - Israel

**Education:**

- 1979 - B.A. in Social Work, Tel Aviv University
- 1988 - M.S.W in Social Work, Tel Aviv University
- 2003 - Mediation
- 2011 - M.A in Law, Bar Ilan University

**Professional Experience:**

- 1978 - 1980 social worker in Belinson hospital
- 1980 - 1982 Manager of the chronic patient in Kupat Cholim Clallit (the biggest clinic in Israel)
- 1982 - 1986 Social Worker, Asaf Hrofe hospital
- 1986 - 1992 Manager of the welfare department in the biggest chain of homes for the elderly in Israel (managing of about 150 employees)
- 1992 - present Lecturer, Bar Ilan University, Tel Aviv University, Kaplan hospital (graduated nurses)



**Prof. Shimon Glick**

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Professor Glick received his MD degree at the Downstate Medical Center in 1955. He specialized in internal medicine and endocrinology. Before his Aliya in 1974 he was clinical professor of medicine at the Downstate Medical Center in New York.

He joined the Ben Gurion Faculty of Health Sciences as professor of medicine and founding chairman of the Division of Medicine, and subsequently served as Dean of the Faculty, and thereafter as head of the Moshe Prywes Center for Medical Education and as acting head of the Lord Rabbi Immanuel Jakobovits Center for Jewish Medical Ethics at the Ben Gurion University.

For over a decade he was the national ombudsman for Israel's Ministry of Health.

He is the husband of Brenda, nee Rubenstein, father of 6, grandfather of 46, and great-grandfather of 81.



### Dr. Ofra Golan

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Dr. Golan received her LLB (Bachelor of Laws) degree from The Hebrew University in Jerusalem on 1977, and was admitted as a member of the Israeli Bar on 1978. She received a Master's degree in healthcare ethics from Manchester University (1993), her MA thesis was on "The right to health care within limited resources". On 2008 Ofra Golan further conferred the degree of Doctor of Laws (LLD) by The Hebrew University in Jerusalem, after her thesis "'The More Knowledge, the More Grief' Disclosure for Informed Consent to Medical Treatment in View of the Patient's Best Interests".

Dr. Golan divides her professional activities between bioethics consultation services, research and teaching.

Since 2003 she serves as the coordinator of the Maccabi Health Services ethics committee, which deals with the ethical aspects of the organization's policy regarding healthcare issues. She also serves as the chairperson of the statutory clinical ethics committees in Maccabi Health Services as well as in several hospitals in Israel, which deal with ethical dilemmas in individual cases. Dr. Golan is a member of the Dying Patient Act National Ethics Committee. She is also a member of the IRBs ("Helsinki committees") of a few hospitals. On 2009 Dr. Golan was appointed by the Ministry of Health's Director General as a member of the Central Committee for Medical Experiments in Human Subjects with Medical Devices and Instrumentation, and on 2014 as a member of the Supreme Committee for Gene Therapy.

Ofra Golan is a member of the International Forum of Teachers, UNESCO Chair in Bioethics. She teaches medical ethics for various health care professionals, including a graduate course for health care commissioners at The Center for Academic Studies in Or Yehuda and a postgraduate course in health systems management at the Academic College of Israel in Ramat-Gan.

From 2003–2012 she was a senior researcher at the unit for genetic policy and bioethics in the Gertner Institute of Epidemiology and Health Policy Research. Since 2013 Dr. Golan has been participating in a few research projects in collaboration with fellow researchers from various institutes. Her research focused mainly on priority setting, informed consent, end-of-life issues, dementia, prenatal genetic testing and telemedicine.



### **Dr. Leeat Granek**

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Leeat Granek, PhD, is a health psychologist with research expertise in grief and loss, psycho-oncology, and women's health.

She has over 60 publications in world-renowned research journals including *The Lancet*, *Cancer*, *Psycho-Oncology* and *Supportive Care in Cancer* and other media outlets (e.g., *New York Times*, *Huffington Post*).

Her work has been covered by the CBC, NPR, *The Boston Globe* and many other international news outlets.

Dr. Granek's work is currently funded by the Israel Science Foundation. Past grants include awards from The American Foundation for Suicide Prevention, The Israeli National Ministry of Health, The Minerva Center for Interdisciplinary Study of End of Life, The Pediatric Oncology Group of Ontario, The Social Sciences Research Council of Canada, and the Canadian Institute of Health Research.

Dr. Granek has received numerous academic awards for her work including most recently the Sigmund Koch award for Early Contribution to the Field of Psychology from the American Psychological Association and the award for research excellence from the Israeli Society for Psycho-Oncology.

This year she was named one of the top 40 under 40 researchers in Israel by the *The Marker Magazine*.



**Prof. Zamir Halpern**

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\*Chair of Digestive Tract Research Center, Tel Aviv Sourasky Medical Center.

\*Prof of Medicine – Tel-Aviv University

\*Chair of the National Council of Nutrition, Gastroenterology and Liver Diseases, Ministry of Health

\*Chief scientist, The Israel National Institute for Health Policy and Research

Prof. Zamir Halpern was born and trained in Israel. He received his medical degree from the Hebrew University and completed his residency of Internal medicine and fellowship of Gastroenterology at Tel-Aviv Medical Center.

In a short time he became the chief of Gastroenterology at the Edith Wolfson Medical Center and at Holon and 4 years later at the Tel-Aviv Medical Center.

He is one of the leading gastroenterologists in Israel and well recognized over the world. He was the chair of the Israeli Association for study of the Liver and the Israeli Society for gastroenterology.

He is the author of more than 200 scientific publications and he is the head of research laboratory affiliated to Tel-Aviv University and his main interest is in personal nutrition and intestinal microbiome. He serves as a consultant to many medical devices companies.

Today, as a scientific director at the NIHP, he focuses on the organization, management and health policy in Israel and also the promotion of research in areas of economics, quality and decision-making in healthcare.

[zamirh@israelhpr.health.gov.il](mailto:zamirh@israelhpr.health.gov.il)

<http://www.tasmc.org.il/sites/en/Personnel/Pages/halpern-zamir.aspx>



**Prof. Shai Lavi**

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Shai Lavi is director of the Van Leer Jerusalem Institute and professor of law at Tel Aviv University. He earned his first and second degrees in law and sociology at Tel Aviv University and a Ph.D. in law from the University of California, Berkeley.

His research combines insight from sociology, legal theory, and philosophy to study bioethical issues from historical and contemporary perspectives. Specifically, he studies the use of technology at the beginning and end of life. After studying the cultural history of dying in the United States, regulation of beginning of life in Israel, and animal slaughter in Germany, he is currently engaged in a comparative research - in Germany, Turkey, and Israel - on issues related to legal regulation of the body and the tension between religion and secularity.

His book on the end of life, *The Modern Art of Dying: A History of Euthanasia in the United States*, won the 2006 Sociology of Law Distinguished Scholarly Book Award of the American Sociological Association. Prof. Lavi has received a Fulbright Fellowship, the Zeltner Prize for young scholars in law, a grant to establish the Minerva Center for Interdisciplinary Studies of the End of Life, and a research grant from GIF, the German-Israeli Foundation for Scientific Research and Development, to study bioethics and society in Israel, Turkey, and Germany.

He has been a visiting professor at Cornell University, the University of Toronto, Yeshiva University in New York, and Humboldt University of Berlin



**Mrs. Irit Laxer**

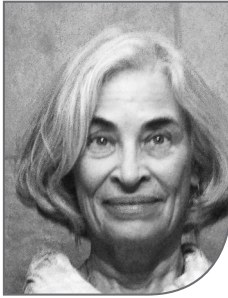
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Ministry of Health

An expert in internal medicine and geriatrics after 13 years of clinical activity in Meir Kfar Saba Medical Center and in the Emergency Room at Sheba Medical Center.

Since 2001, Dr. Laxer has been in the Geriatrics Department of the Ministry of Health as Director of the Department of Standards, Procedures and Control, as well as leading national programs for the rehabilitation of the elderly and now leading the national program for palliative care and end-of-life situations.

In her position, she has led various standards regarding the quality of care for the elderly and chronically ill in the community, especially in the active and chronic geriatric hospitalization system. Coordinating the supervision system and modeling the control layout, including safety of treatment.



**Mrs. Lynne Dale Halamish**

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M.A., C.T.

Over two and a half decades of counselling experience with severely ill adults and children and their families during both illness and bereavement. Counseling of persons suddenly bereaved by terror, accident, illness or violence of any kind.

Teaching and lecturing extensively in Europe, the Middle East, Russia and the USA. In-hospital staff training particularly in departments with high mortality rates.

Co-author of *The Weeping Willow: Encounters with Grief*.

#### Work Experience

2004 to present Instructor in INPACT Israeli National Palliative Care Training program on the subjects of Dealing with Death and A Child's View of Death; 2004 to present Seminars for Oncology, Hematology, Nephrology, Obstetrics, Women's medicine, Internal medicine, Pediatric Oncology, Emergency medicine departments on Dealing with Death, Death Through the Eyes of the Child, Breaking Bad News, Communication and Staff Burnout in the following medical centers in Israel: Naharia, Tel HaShomer, Hadassah Ein Kerem, Hadassa Har HaTsofim, Shaare Tzedek in, Ichilov, Wolfson, Asaf HaRofe, Meier, Rambam, Carmel, Bnei Tsion, HaEmek, Soroka, Shoham Medical Center, Pardes Hanna; 2012 to 2016 Guest lecturer in Tsfat Medical School; 2003 to 2007 Design and Lecturer: course on 'Grief and Loss', Technion School of Medicine; 2000 to present Betuach Leumi (National Health Insurance)- Training seminars for psycho-social teams to counsel and run support groups for persons bereaved by terror; 1995 to 2015 Technion School of Medicine - guest lecturer in 'Life Cycle' course; 1988 to present Grief and bereavement counselor, in small communities, schools, general population, for dying persons, their families and families bereaved by sudden, unexpected death by any cause; 1988 to present Free lance lecturing on subjects dealing with coping with death and loss to audiences including physicians, nurses, social workers, psychologists, physiotherapists, school children, teachers, educators, widows/ers, bereaved siblings and the general population; 1997 to present Teaching in nursing schools, Pat Mateus Nursing school, Hillel Yaffe Medical Center; From 1999 to present Center for Advanced Studies in Nursing for North Israel, Rambam Medical Center; From 2003-2005 Meyer Hospital Nursing School.



**Prof. Orly Manor**

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Chairwoman of the Board of Directors, The Israel National Institute for Health Policy Research and a Professor of Biostatistics at the Braun School of Public Health and Community Medicine of the Hebrew University–Hadassah Medical Organization in Jerusalem. Prof. Manor is a former Director of the School.

Prof. Manor received her first and second degrees in Statistics from the Hebrew University and her PhD in Statistics from Stockholm University.

Currently Prof. Manor leads the Israel National Program for Quality Indicators in Community Healthcare. Prof. Manor is the founder of the Israel Longitudinal Mortality Studies.

Prof. Manor’s research interests include health inequalities, the developmental origin of adult disease and quality of care.

In 2012, Prof. Manor was the recipient of the Hebrew University Rector’s award for outstanding faculty member.



**Mrs. Tikva Meron**

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Clinical nurse specialist in palliative care since 2010, working as a palliative care consultant at Sheba Medical Center since 2013, with a background experience in adult (and some pediatric) palliative care in various settings. Completed MSc in palliative and end-of-life care in UK (2009), and PhD in UK (2014), researching on the meaning of advance-directives.

Working in the field of oncology mostly, she performed diverse managerial, educational and clinical roles, namely recently leading palliative care specialization program for nurses. Chair of the Israel Association of Palliative Care - TMICHA - since 2015.



**Prof. Ora Paltiel**

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BSc, MDCM, MSc, FRCPC

Born and raised in Canada, and trained in Medicine and in Epidemiology at McGill University, Montreal Canada, Dr. Paltiel moved with her family to Israel in 1992. She has been a Senior Physician in the Hematology Department at Hadassah and a teacher/investigator at the Braun School of Public Health & Community Medicine of Hebrew University/Hadassah since 1992, serving as Director of its International Program (IMPH) from 2013–2016, and as Head of the School since February 2016. Since 2012 she has been the Director of Hadassah’s Center for Research in Clinical Epidemiology. She is on the Directorate of the Israel National Quality Indicators in Community Health care program (QICH).

Professor Paltiel a specialist in Internal Medicine and Hematology, with a primary clinical emphasis on lymphoma, and with further training in epidemiology. Her research interests include cancer and clinical epidemiology. She is the author of over 150 peer-reviewed publications. Her research focuses mainly on genetic, viral and environmental risk factors non-Hodgkin lymphoma.

Prof. Paltiel is a committed educator and has won numerous teaching awards including the Rector’s Prize for Research and teaching in 2018 at the Hebrew University. She teaches Masters’ level courses on Cancer Epidemiology, Clinical Epidemiology, Research Forum and Clinical Trials, as well as Epidemiology and Hematology for medical students. She runs short courses on clinical trials methodology and ethics throughout Israel, and is the academic coordinator for GCP training for the Israel Medical association. In 2016 she organized and chaired an international workshop on Professionalism, sponsored by the Israel National Institute for Health Policy Research (<https://ijhpr.biomedcentral.com/articles/10.1186/s13584-017-0144-5>.)

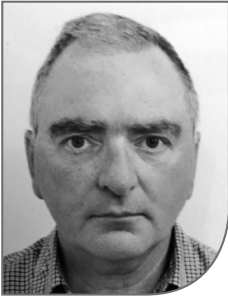


### **Dr. Maya Peled-Raz**

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Dr. Maya Peled Raz (LLB, MPH, PhD) is a lecturer of law and ethics at the University Of Haifa, School of Public Health. She is the Chair of the Research Ethics Review Board (ERB) of the Faculty of Social Welfare and Health Sciences at the University of Haifa, a member of the Association of University Heads (VERA) working group on Research Ethics Review Boards (ERB's) in the Israeli academia, the chair of the Ethics Committees at Bnei Zion Medical Center in Haifa and the Galilee Medical Center in Naharia and a member of the Advisory Committee for Ethics in Citizens' Science Research at the Israel Institute of Technology (Technion).

Her Central areas of research and teaching include: Public health law and ethics; the law and ethics of research with human subjects; human rights in patient care; and children in health care settings.



### **Dr. Sergey Postovsky**

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Doctor Sergey Postovsky was born in Saint Petersburg, Russia in 1960. He graduated from Pediatric Institute in 1987 and since 1990 has been living and working in Israel. He completed residency programs in pediatrics and pediatric oncology/hematology in Rambam Medical Center in Haifa.

Doctor Postovsky has been working at the department of pediatric oncology/hematology since 1994, first as resident, and thereafter (1999) as a senior physician.

Since 2009 Doctor Postovsky has occupied position of Senior Deputy Director in above-mentioned department. His fields of expertise are brain tumors, bone and soft tissue sarcomas, and palliative care, especially end-of-life issues.

Doctor Postovsky serves as a General Secretary of the Israeli Society of Palliative Medicine. As a staff member of Faculty of Medicine in Technion in Haifa, he occupies position of Clinical Assistant Professor since 2011.

Doctor Postovsky authored more than 60 scientific articles published in various journals in the field of pediatric oncology and palliative medicine. He is also an author of several chapters in scientific books on pediatric palliative care.



**Dr. Iris Rasooli**

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Head, Geriatric Community Services Department, Geriatric Division, Israel Ministry of Health.

Teacher, Braun School of Public Health and Community Medicine, Hadassah-Hebrew University.

Born and raised in Israel.

Completed academic studies at the Hebrew University in Jerusalem, Israel, graduating from the Faculty of Science (with honours), and from the Faculty of Medicine in Medicine and later in Public Health, receiving prizes for both theses.

Trained in Public Health at the Hadassah Medical Center and Braun School of Public Health and Community Medicine, in Jerusalem, Israel and a specialist in that area since 1989.

Post-Doctoral Research Fellowship at the University of Toronto, Canada, in 1990-1993, in Preventive Medicine and Biostatistics as well as in Bioethics.

Fullbright Hubert H. Humphrey Fellowship (U.S. program for accomplished professionals from designated countries), at the University of Washington and additional settings, in 1998/9 - focusing on Geriatric Healthcare Services.

Since 1995 - head of the Geriatric Community Services Department at the Geriatric Division in the Ministry of Health. Throughout the years in the ministerial position have led various national programs for healthcare for the elderly, and program evaluations.

In 2012 completed residency in Medical Management and is a specialist in that area.

During the years worked partly as a clinician in primary care, and recently at the Geriatric Rehabilitation Department, Tel Aviv Medical Center (Ichilov).



### Estelle Rubinstein

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MSW

Estelle Rubinstein has been the Director of the Department of Social Work Services at the Hadassah University Medical Center in Jerusalem, Israel since 2013.

She received her BSW at the Paul Baerwald School of Social Work and Social Welfare at the Hebrew University of Jerusalem in 1981 and completed her Master's Degree at the same university in 1998 with a thesis on the biographical meanings of HIV infection.

Ms. Rubinstein has worked as a social worker at the Hadassah University Hospital since 1981. In addition to extensive clinical experience – primarily in the fields of Oncology, AIDS and Emergency Medicine (Mass Casualty Events) – she was also the Deputy Director of the Department Social Work Services between 2001 and 2013, has been an appointed member of the Ethics Committee of the hospital since 2008, and has been a member of the Steering Committee of the Research Group on Social Work in Health (a collaboration between Department of Social Work Services at Hadassah and the Paul Baerwald School of Social Work and Social Welfare at the Hebrew University of Jerusalem) since the Research Group's inception in 2004.

Ms. Rubinstein has taught at the Hebrew University's School of Social Work (1998 to 2015) and at the School of Medicine in the Program of Medical Humanities (2009 to date).

Since 1989 Ms. Rubinstein has been involved in the clinical training of social work, medical and nursing students at the Hadassah University Hospital in the fields of Medical Social Work, Psycho-oncology and the psycho-social aspects of HIV/AIDS.



**Prof. Pesach Shvartzman**

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Pain and Palliative Care Unit, Family Medicine Department, Faculty of Health Sciences; Ben-Gurion University of the Negev, Beer-Sheva, Israel.

Pesach Shvartzman is a Professor and Head of the Pain and Palliative Care Unit Soroka Medical Center and of the Family Medicine Department Clalit Health Services within the Faculty of Health Sciences at the Ben-Gurion University of the Negev, in Beer-Sheva, Israel. He graduated in Medicine from the Technion-Israel Institute of Technology, and received a Board Certificate from the American Board of Pain and Palliative Medicine, as well as Pain Medicine. He is an Israeli board certified in Pain Relief Medicine, Palliative Medicine and Family Medicine.

Prof. Shvartzman is a past Chairman of the Israel Family Medicine Association. He is the Founder of the Israel Palliative Care Society and a member of numerous societies, including the International Association of Hospice and Palliative Care, the Israeli Cancer Association and the Oncology National Council of the Israel Ministry of Health.

He is the present chair of the Israeli Palliative Medicine Association.

Prof. Shvartzman has written over 200 scientific papers and several chapters in oncology and family medicine textbooks. He is the editor of The Israel Pain and Palliative Care Journal and the editor of The Family Medicine Journal. He is also the recipient of the Israel Family Medicine Association Award, the Israel Palliative Care Society Award, and the Israel Pain Association Award, among others.



**Prof. Dorit Shaham**

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Prof. Dorith Shaham is the Director of CT and Cardiothoracic Imaging Unit at the Department of Medical Imaging, Hadassah Ein Kerem, Chair of Clinical Teaching Committee at the Hebrew University School of Medicine and Head of the Academic Committee of the Center for Dignified End of Life of the Hebrew University.

Prof. Shaham earned her MD from the Hebrew University–Hadassah School of Medicine in 1988 and completed her residency in diagnostic radiology at Hadassah in 1995. In 1997, Prof. Shaham completed a clinical fellowship in the Division of Thoracic Radiology at the New York Hospital, Cornell Medical Center, and in 2003 she returned for a research fellowship at the same institution.

Upon her return to Israel and Hadassah in 1998, Prof. Shaham established the first lung cancer screening program in Israel at Hadassah, as a part of the International Early Lung Cancer Screening Program (I-ELCAP). She has studied the cost-effectiveness of low-dose CT-based lung cancer screening in Israel. In 2007, Dr. Shaham was named the Head of Thoracic Imaging at Hadassah and Clinical Senior Lecturer at the Hebrew University–Hadassah School of Medicine, with advancement to Clinical Associate Professor in 2012. In 2007, she established the ‘Adam veRefuah’ Program of Medical Humanities at the Hadassah–Hebrew University School of Medicine, and headed it for 10 years. Since 2015, she was involved in the efforts to establish the Center for Dignified End of Life at the Hebrew University and was appointed as Head of its the Academic Committee in 2017.

Other research interests include medical education in the fields of Medical Humanities, End of Life and Diagnostic Radiology.



**Dr. Adir Shaulov**

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Experience

- Sep 2017 – present      Department of Hematology, Hadassah Medical Center – Ein Kerem  
Jerusalem, Israel  
Attending physician
- Aug 2016 – July 2017      Department of Supportive Care, University Health Network  
Toronto, Ontario  
Fellow  
- Completed clinical fellowship in palliative medicine  
- Research in palliative care in hematological malignancies
- Jan 2014 – present      Palliative Care Service, Hadassah Medical Center – Ein Kerem  
Jerusalem, Israel  
Palliative care team coordinator  
- Founder and coordinator of an inpatient palliative care team serving a  
700 bed tertiary hospital  
- Author of hospital guidelines for End-of-Life care
- Jan 2016 – Jul 2016      Department of Hematology, Hadassah Medical Center – Ein Kerem  
Jerusalem, Israel  
Attending physician
- April 2013 – Dec 2015      Department of Hematology, Hadassah Medical Center – Ein Kerem  
Jerusalem, Israel  
Hematology fellow and clinical instructor  
- Completed requirements for specialty in clinical hematology
- Dec 2013 – March 2013      Department of Internal Medicine, Hadassah Medical Center – Mt. Scopus  
Jerusalem, Israel  
Attending physician
- Dec 2008 – Nov 2012      Department of Internal Medicine, Hadassah Medical Center – Mt. Scopus  
Jerusalem, Israel  
Internal Medicine resident and clinical instructor  
- Recipient of faculty award for excellence for 2012–2013



**Dr. Gil Siegal**

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Director, Center for Health Law and Bioethics, Ono Academic College, Israel.

Professor of Law, University of Virginia School of Law.

Senior Researcher, Gertner National Institute for Health Policy, Israel, Department

of Genetic Policy and Bioethics, 2005 – present:

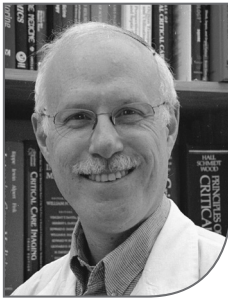
Fellow in Health Policy and Ethics at the Law School and the Institute for Practical Ethics, University of Virginia, USA. 2003–2004

Research Fellow in Medical Ethics, Harvard University Medical School, Boston, USA 2004–2005

Consultant and Research Fellow, Harvard University School of Public Health, Boston, USA 2005 (medical malpractice)

Academic Ranks and Tenure in Institutes of Higher Education

2008 – present	University of Virginia, School of Law, USA Professor of Law, General Faculty
2006–2007/2007–2008	University of Virginia, School of Law, USA Visiting Professor
2005 – present	Ono Academic College Senior lecturer/Assoc. Prof.
2002 – 2005	Law School and Faculty of Social Welfare & Health Studies, Haifa University Senior Lecturer /Assoc. Prof.
2004 – 2005	University of Virginia, School of Law, USA Visiting Faculty
2005 – 2006	Hebrew University Law School Adjunct
2005 – present	Bar-Ilan University Law School Adjunct
2001 – present	Medical School, Technion, Haifa Lecturer (adjunct)
1999 – 2001	University of Manchester Law School, UK – Hakiryia Ha'academit, Israel Visiting Lecturer
1996, 1998–99/ 2005–2006	Tel Aviv University, School of Continuing Education Visiting Lecturer



### **Prof. Charles Sprung**

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Professor Charles Sprung is the Director Emeritus of the General Intensive Care Unit in the Department of Anesthesiology and Critical Care Medicine at Hadassah Hebrew University Medical Center.

Professor Sprung has been active in research particularly studying sepsis, septic shock and ethical issues for 40 years.

He was the Chairman or Co-Chairman of the Task Force/Committee on Ethics of the Society of Critical Care Medicine from 1987 to 1994 and the Chairman or Co-Chairman of the Section on Ethics of the European Society of Intensive Care from 1996 to 2001 and from 2004-2007.

He was the chairman of the scientific/medical subcommittee of The Israeli Terminally Ill Law, 2005.

He is the Coordinator of several multi-center studies in ethics including End of Life Decision Making and Procedures in European Intensive Care Units - ETHICUS, Systematic Study of General Ethical Principles Involved in End of Life Decisions for Patients in European Intensive Care Units - ETHICATT and Triage Decision Making for the Elderly in European Intensive Care units - ELDICUS.

He has published extensively in ethical issues such as informed consent, end of life and triage.

He presently is the Chairman of the Implementation Committee of the National Palliative Care and End of Life Program of the Ministry of Health.



### **Rabbi Prof. Avraham Steinberg**

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Associate Clinical Professor of Medical Ethics, Hebrew University–Hadassah Medical School, Jerusalem

- Author of The Encyclopedia of Jewish Medical Ethics – 7 volumes in Hebrew (2 editions) and 3 volumes in English (translation by Dr. Fred Rosner)
- Author of Ha'Refuah Ka'Halakha – 6 volumes in Hebrew.
- Director, Medical Ethics Unit, Shaare Zedek Medical Center, Jerusalem
- Chairman, Institutional Review Board (IRB – 'Helsinki Committee'), Shaare Zedek Medical Center, Jerusalem
- Co-Chairman, The Israeli National Council on Bioethics
- Director, Yad Harav Herzog Institutions & Head of Editorial Board, The Talmudic Encyclopedia & Editor-in-Chief, The Talmudic Micropedia
- Chairman, National Committee for Inspection on Mohalim, The Chief Rabbinate of Israel & The ministry of Health
- Chairman and member of various Israeli national committees and councils concerning issues in medical ethics and in medicine and law:

#### PRESENT:

Chairman, National Committee in accordance with the Dying Patient Act – 2005

Member, National Committee in accordance with the Brain Death act – 2008

Member, Committee for medical matters, The Chief Rabbinate of Israel

Member, Committee of inter-religious dialogue, The Chief Rabbinate of Israel

Member, Ethics committee, Shaare Zedek Medical Center, Jerusalem

Member, Pontifical Academy for Life, The Vatican



**Dr. Shelley Sternberg**

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MD, MSCE, FRCPC

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**Dr. Daniel P. Sulmasy**

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Dr. Sulmasy is the André Hellegers Professor of Biomedical Ethics in the Departments of Medicine and Philosophy at Georgetown University, where he is a member of the Pellegrino Center for Clinical Bioethics and a Senior Research Scholar in the Kennedy Institute of Ethics.

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He has served on numerous governmental advisory committees, and was a member of the U. S. Presidential Commission for the Study of Bioethical Issues 2010–17.

His research interests encompass both theoretical and empirical investigations of the ethics of end-of-life decision-making, informed consent for research, and spirituality in medicine.

He is the author or editor of six books – *The Healer’s Calling* (1997), *Methods in Medical Ethics* (1st ed., 2001; 2nd ed., 2010), *The Rebirth of the Clinic* (2006), *A Balm for Gilead* (2006), *Safe Passage: A Global Spiritual Sourcebook for Care at the End of Life* (2014), and *Francis the Leper: Faith, Medicine, Theology, and Science* (2015).

He also serves as editor-in-chief of the journal, *Theoretical Medicine and Bioethics*.

In June 2017 he was appointed by Pope Francis as an Ordinary Member of the Pontifical Academy for Life.

Now happily married, he was a Franciscan friar from 1985 to 2010.



**Dr. Rotem Telem**

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Upon completion of her fellowship in geriatrics she had continued for a second fellowship in palliative care. She had focused on implementing palliative care in intensive care units and on palliative care education.

After completion of her fellowship programs she had returned to Israel and joined the geriatric division of her home institution, alongside establishing and forming the new palliative care service at her hospital.

As a trained palliative care physician she had participated in several national committees and is involved in initiatives to advance the use of palliative care in Israel, still a new and unfamiliar in our medical system. She is teaching and promoting the subject to physicians, nurses, other health care professionals and students. she is involved in quality improvement in her hospital, specifically in the care of elderly patients and dying patients.



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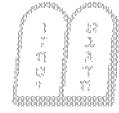
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## Medical Ethics

### The Dying Patient Act, 2005: Israeli Innovative Legislation

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One of the most difficult moral, cultural, religious, and legal issues in medical ethics is the treatment of the dying patient. In the past few decades the dilemma has intensified for various reasons: the enormous advances in medicine and technology; the change in the patient-physician relationship from a paternalistic to an autonomous approach; the greater involvement of various professionals in treating the dying patient (specialists, nurses, social workers, students, laboratory technicians and others); economic changes due to the very expensive treatments and technologies, and social changes with a significant decline in the role of the physician. In Israel, various policies, guidelines and declarations have been proposed in recent years; but the situation has been confusing, with physicians not knowing what was allowed and what not, acting inconsistently, and often not discussing decisions with patients, next-of-kin, or other health-care professionals, and not documenting life and death decisions [1].

There are varied approaches around the world concerning the dying patient [2,3] and many countries are still battling with these issues. We feel that the development process and the actual Israeli Law may provide useful insights for other countries and for the professionals.

#### Israeli Legislation – the process

A detailed and comprehensive law regulating the treatment of the dying patient was enacted on 6 December 2005 by the Knesset (Israeli Parliament). The legislation was the product of six years of intensive professional and public debates and discussions. On 20 February 2000, a national committee was appointed by the Minister of Health to enact a law regulating all matters concerning the dying patient, with one of the authors (A.S.) serving as chairman. The Committee comprised 59 individuals, all specialists and high-ranking professionals in their fields, representing the entire spectrum of relevant views. No member was a political or otherwise interested appointment. The multidisciplinary Committee was divided into four subcommittees: a) A medical/scientific subcommittee, including physicians, nurses, social workers and sociologists. The physicians represented all fields of medicine dealing with dying patients (intensive care, palliative medicine, cardiology, geriatrics, anesthesiology, psychia-

try, pediatrics, neonatology, rehabilitation, oncology, neurology, hospital management). b) A philosophical/ethical subcommittee, including philosophers, medical ethicists and clergy from different religions. c) A legal subcommittee, including judges, lawyers, professors of law, and legal advisors of relevant ministries. d) A subcommittee representing *Halakha* (Jewish law), including rabbis and physicians who were well versed in matters of medicine and Halakha. All debates and discussions of the Committee were closed to the media. All the members made a serious attempt to reach as wide a consensus as possible despite previously held strong opinions and the very difficult and emotionally loaded issues at stake.

On 23 May 2004, the proposed law of the Committee was accepted by the Israeli government and on 6 December 2005 it was finally legislated by the Knesset as "The Dying Patient Act."

The Committee was successful in reaching a wide consensus on almost all issues related to the dying patient, despite the inherent complexity of the subject, and despite the deep differences of opinion between members of the Committee. The only significant dissenting opinions were on the issue of withdrawing continuous treatment (i.e., ventilator) and withholding food and fluid from a non-competent dying patient not yet defined as being in the final stage. Although in principle there remains disagreement on these issues, with a minority opinion accepting the principle that there is no difference between withholding and withdrawing any therapy, the Committee managed to minimize the practical disagreement by accepting the concept of a timer attached to a ventilator [4].

#### The Law – highlights

##### Fundamental assumptions

- The majority of people do not want to die; on the other hand, the majority of people do not want to suffer at the end of life and they do not want their lives to be prolonged artificially.
- Every person is assumed to want to continue living unless proven otherwise; in case of reasonable doubt one should err in favor of life.
- Every adult person is assumed to be competent unless proven otherwise.

- The definition of a minor in this Law is a person under 17 years of age.
- A dying patient is defined as one who will die within six months despite medical therapy; the last two weeks of expected life are defined as the final stage.
- From a philosophical point of view neither the value of life nor the principle of autonomy is an absolute value. Hence, there ought to be a balance between these principles, based upon the value system of Israel as a Jewish and democratic state. There is a need to determine the boundaries of prolonging life versus the avoidance of unjustifiable and unwanted suffering.
- Decisions concerning dying patients should be based solely on the medical condition of the patient, his or her wishes, and the degree of their suffering. No other factors should be considered when deciding how to treat the dying patient.
- In the case of an incompetent patient at the time of the required decision, the Law strikes the following balance:
- Commission of acts that hasten death is prohibited, whereas omission of life-sustaining therapies is permissible.
- Sanctity of life overrides autonomy by prohibiting any action that intentionally and actively shortens life (i.e., active euthanasia or physician-assisted suicide), even if these acts were previously requested by the patient.
- On the other hand, the principle of autonomy overrides sanctity of life by permitting the withholding of treatments if this was the wish of the patient.
- The Law distinguishes between two types of treatments: the first is continuous life-sustaining therapies (cardiac pacemaker or respirator), which cannot be stopped because this is viewed as an act that shortens life. The second is intermittent life-sustaining therapies (dialysis, chemotherapy, radiotherapy), which can be stopped if they are directly related to the dying process. Terminating intermittent or cyclic life-sustaining treatments is viewed as omitting the first or next treatment rather than committing an act of withdrawal.
- These decisions are founded in the Jewish legal system where there is no obligation to actively prolong pain and suffering of a dying patient, but any action that intentionally and actively shortens life is prohibited.
- Since continuing unwanted ventilatory treatment would prolong suffering, the Law allows the possibility of changing the ventilator from a continuous form of treatment to an intermittent form by connecting a timer and allowing the ventilator to stop intermittently [4]. This is based on the Jewish legal concept that not only does the end have to be morally justified (i.e., the death of a suffering terminally ill patient), but also the means to achieve it ought to be morally correct. Hence, the technology that turns the ventilator to an intermittent form of therapy defines it as an omission rather than commission. This innovative approach is also psychologically helpful to health-care providers who have problems executing the wish of the patient.
- The Law prohibits the withholding of food and fluid from a currently incompetent dying patient for the following reasons: the value of life in such situations overrides the previous autonomous wishes of the patient which are now unknown; food and fluid are regarded as a basic need of any living being, rather than a form of treatment; socially and emotionally there is a fundamental difference between food and fluid and other life-sustaining treatments; dying of starvation and dehydration is regarded in Jewish philosophy as an indignity to life; withholding food and fluid is unrelated to the dying process and hence is regarded as a form of euthanasia.
- When the patient approaches the final days of his or her life, defined by the Law as less than two weeks, it is permissible to withhold food and even fluids, if such was the clear wish of the patient before becoming incompetent.

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*Neither the value of life nor the principle of autonomy is an absolute value. Hence, there ought to be a balance between these principles.*

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#### **Treatment modalities**

Several values are involved in treating dying patients. These include the value of life, the principle of autonomy, beneficence, non-maleficence, and distributive justice. The basic dilemma is how to strike a balance between the sanctity of life and the principle of autonomy. Almost no one advocates accepting an extreme and absolute position concerning either the value of life (i.e., prolonging *any* life by *all* means at *all* times and at *all* costs, even when it adds only pain and suffering) or the principle of personal autonomy (i.e., accepting autonomous wishes for active euthanasia of healthy people or non-terminally ill patients). Hence, there is an obvious need to decide on where the line between these values should be drawn. Any distinguishing boundary line, however, is debatable. Therefore:

- When sanctity of life and autonomous patient wishes both require prolonging life, they should be respected even if the patient's request seems to be futile by the conceptions of the caregivers, unless it is harmful to the patient or others.
- When the autonomous wishes of the patient demand shortening of life and hence are in opposition to the sanctity of life, it depends on the current status of the patient:
- If the dying patient is competent and refuses any treatment, including food and fluids, he or she should not be forced against their wishes, however they should be encouraged to change their mind; thus, the respect for autonomy and human dignity takes priority over the respect for value of life. This, however, does not include active euthanasia or physician-assisted suicide, which are prohibited by overriding societal values even if the patient autonomously requests them.

At this final stage of life, food and even fluids may cause suffering and complications.

- Based upon the notion of the dignity of man and upon the moral requirement to alleviate pain and suffering, the Law requires providing palliative care according to current medical standards to the patient and to his or her family. This includes palliative treatment that might unintentionally shorten life, based on the principle of double effect.

#### Procedural aspects

The Law requires appointing a senior physician as the responsible health-care provider. The tasks include:

- Establishing the medical situation of the patient
- Analyzing all relevant facts and documents together with all other experts and decision makers
- Establishing the wishes of the patient
- Identifying the close person who should take part in the decision-making process
- Formulating a detailed plan of treatment
- Documenting all the decisions in a clear and explicit manner
- Informing all relevant parties of the decisions.

The Law establishes various mechanisms verifying that advanced medical directives are the calculated wishes of the now-incompetent dying patient, including the following:

- A detailed form, attached to the Law, to be filled out by any competent person at any time in life with the aide of a physician or nurse
- Renewal of the statement every five years
- Reevaluating the statement when a serious illness is diagnosed, with the aide of an expert physician in the field of the actual ailment
- Establishing a national registry of advanced medical directives. The registry's responsibility includes sending reminders every five years to the owners of the advance directives to verify whether or not they have changed their minds about the directives. The registry also serves as a source of information whenever an incompetent patient is admitted to a hospital and it is unknown whether there is an advance medical directive, or what is stated in it.

Testimonies about the incompetent dying patient's wishes by family members or friends known to be emotionally related to the patient can be accepted by the responsible physician.

The Law establishes institutional ethics committees as a problem-solving mechanism. It also establishes a National Ethics Committee as an authority of appeal and with the mandate to solve more difficult problems as well as establishing policies. These committees are composed of experts in the fields of medicine, nursing, social work, psychology, law, and ethics, as well as the clergy. This mechanism is meant to avoid the involvement of courts in a matter that is better dealt with by a multidisciplinary group of experts rather than by strict legal procedure.

#### Types of patients

The Law relates to several categories of patients and establishes the medical and social attitude towards them. The fundamental criterion to be included in this Law is the life expectancy of the patient – i.e., one who is suffering from an incurable medical condition and his or her life expectancy, even if medical treatment is provided – is no more than six months.

The Law deals with the following categories of patients who fulfill the basic definition of a dying patient according to the Law:

- Adult (17 years and older) competent patient
- Adult patient currently incompetent who was previously competent
- Adult patient who has never been competent
- Minor, i.e., less than 17 years old.

The Law does not relate to the following categories of patients: Terminally ill patients whose life expectancy is longer than six months, and newborn infants, particularly extremely preterm born babies.

#### Summary

The new Israeli Dying Patient Act is based on principles and processes that have achieved a wide consensus despite the fact that it is a very complex and emotionally loaded issue. It provides clear balancing approaches between opposing values as well as explicit mechanisms for issues that were previously not provided for in Israel or were unclear. These include mechanisms for providing autonomous patient decision making when incompetent in "real time," with legally binding advance medical directives. These include methods of verifying the real and informed wishes of the patient or the appointment of a surrogate decision maker, a national registry of advance medical directives to optimize the validity of these wishes, legally binding palliative care as a citizen's right, clear guidelines for physicians to know what is permitted and what is not in treating terminally ill patients, the appointment of a senior physician with clear directives of his or her responsibilities toward the dying patient, and dispute resolution including the innovative establishment of a National Ethics Committee composed of experts in all relevant fields.

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#### References

1. Sonnenblick M, Friedlander Y, Steinberg A. Dissociation between the wishes of terminally ill parents and decisions by their offspring. *J Am Geriatr Soc* 1993;41:599–604.
2. Sprung CL, Cohen SL, Sjøkvist P, et al. End of life practices in European intensive care units – the Ethicus study. *JAMA* 2003;290:790–7.
3. Prendergast TJ, Claessens MT, Luce JM. A National survey of end of life care for critically ill patients. *Am J Respir Crit Care Med* 1998;158:163–7.
4. Ravitsky V. Timers on ventilators. *Br Med J* 2005;330:415–17.

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