

Case 25 – Sarah

Sarah is a 17 year-old with a mental age of 5-6 and epileptic. Her mother alleges Sarah cannot understand the causal connection between intercourse, pregnancy and birth. She has the sexual inclinations of a normal 17 year-old. If she was given oral contraceptives there is estimated to be a 40% chance of her keeping to the regime. There would be serious side effects. She is also obese and has irregular periods so that if she become pregnant this might not be discovered early. Sarah's mother would like to have her sterilised.

Best Practice Response

Relevant ethical consideration and medico-legal issues

- Patient autonomy and the impact that an intellectual disability may have on a patient's capacity to consent to medical treatment raises a number of issues that require a respectful and compassionate approach to patient care. Issues for consideration include:
 - Does the patient have capacity to understand the particular challenges that arise with regard to her sexual and reproductive health?
 - Is the patient able to take an active role in making decisions about her healthcare?
 - Has the patient and/or carer received education and support regarding menstrual hygiene, sexuality and protective barriers?
 - What alternative methods to sterilisation have been considered and/or trialled (eg. long-acting contraceptive methods)? How were the alternative methods tolerated?
- All patients should be treated with respect at all times. Good medical practice involves:
 - Not discriminating on medically irrelevant grounds, including on the basis of a patient's disability.
 - Recognising the role of parents or guardians in decisions about their child's healthcare.
 - Treat the patient's family members and carers with respect and recognise that they too may need support.
- Special treatment under Guardianship law:
 - Where a patient is incapable of giving consent to the carrying out of treatment that has the effect of rendering that person permanently infertile, an order of a Court is required before such treatment can be administered.

MDA's recommendation

- In the present case study, further targeted information should be sought about any previous attempts at managing Sarah's sexual and reproductive health that will enable her to realise her full potential as a woman, having regard to her capabilities and specific needs.
- Involve Sarah in health-care decision-making, and, if necessary, involve specialist disability services.
- Offer support and guidance to Sarah's mother. Explore her reasons for wanting Sarah to be sterilised and discuss less invasive alternatives.

Resources

- G. Eastgate, Sex, Consent and Intellectual Disability, *Australian Family Physician*, Vol 34, No 3, Mar 2005
- AMA Code of Ethics
- Good Medical Practice: A Code of Conduct for Doctors in Australia.