



I15 Forensic Objective Competence Assessment Versus Severity of Symptoms and Global Functioning Assessment for Schizoid Inpatients Based on Egyptian Law

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After attending this presentation, attendees will better understand the application of the law for mentally ill patients through objective assessment of competence to consent to treatment using forensic instruments and clinical scales.

This presentation will impact the forensic science community by demonstrating how objective assessment may evaluate and enhance the assessment of patients' decision-making capacities.

In medical ethics, the principle of a patient's self-determination obliges the physician to obtain the patient's consent prior to medical treatment.¹ Law protects individuals from medical or psychological interventions against their desires, except in certain emergency or court-ordered circumstances. The Declaration of Madrid stresses the patient's right to be fully informed of the nature of the condition, subject to proposed diagnostic and therapeutic procedures, including possible alternatives, and the right to choose between available methods.²

One condition for valid, informed consent is the patient's competence, which may be impaired, particularly in patients with mental health problems.³ The term "competence to consent" refers to an individual's legal capacity to accept a proposed treatment, to refuse treatment, and to select among treatment options. The question of an individual's competence to consent to (or to refuse) a proposed treatment intervention requires that the individual must: (1) be provided information relevant for the decision; (2) make the choice voluntarily; and, (3) be competent to make the decision.⁴ In most cases, if the situation causes the physician to examine competence, he will proceed using his own subjective judgment and clinical experience, and he may have difficulty applying standards suggested in the literature.⁵ Physicians often evaluate competence differently.⁶

The MacArthur Treatment Competence Study (MacCAT-T) uses instruments relating to the following four legal standards: (1) to understand information relevant to the decision; (2) to manipulate the information rationally; (3) to appreciate the significance of the information disclosed about the illness and possible treatments; and, (4) to express a choice.⁷ Legal standards for competence to consent to (or to refuse) treatment do not specifically require that deficits in relevant functional abilities must be a "product" of mental illness. Schizophrenia is associated with poor insight and cognitive dysfunction, which may influence decisional capacity. However, the mere presence of schizophrenia does not in and of itself signify that the patient has impairments in legal capacities.

This study's goal is to identify the four types of cognitive abilities which are the domain of functional abilities related to legal definitions of competence to make treatment decisions.⁸

In order to comply with the relatively new legislation in Egypt to consider the presence of severity of symptoms and deterioration of functions for the involuntary admission, the Brief Psychiatric Rating Scale (BPRS) and the Global Assessment of Functioning (GAF) scale are applied.

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