

September 25, 2025

Update to VADSA Supporters

Dementia Insert for your Advance Care Directive

Dementia is the leading cause of death in Australia (see [AIHW report](#)). However, under current Voluntary Assisted Dying (VAD) laws in Australia, a person with dementia is unlikely to be able to use VAD. Nor can you list VAD as a choice in your Advance Care Directive.

In the absence of VAD as an end of life choice for a person with dementia, it is valuable to provide your substitute decision maker nominated in your Advance Care Directive with detailed guidance on what treatment you do or do not want, and the circumstances in which that direction would apply.

VADSA has developed a “Dementia Insert” for your Advance Care Directive which can assist you in providing that detailed guidance for your substitute decision maker and your medical team. Remember that your Advance Care Directive only comes into effect once you lose the capacity to make decisions about your medical treatment for yourself. (The “Dementia Insert” is useful for any medical condition where you may later lose capacity, not just dementia.)

The “Dementia Insert” was originally developed by VAD assessing doctors in Australia and New Zealand.

VAD and Dementia

There are two main reasons why VAD is unlikely to be an end of life choice for a person with dementia.

In the early stages after a dementia diagnosis, the person will not meet the criteria for their death being expected within the next 12 months. In the later stages of dementia, the person will no longer have decision making capacity. To be assessed as eligible for VAD, a person with a neurological condition must be assessed as expected to die within 12 months, as well as have the capacity to make an informed decision to choose VAD.

The ACT VAD Act does not include the 12 month prognosis and is due to commence in November this year. The criteria in the ACT is that the person is diagnosed with a medical condition that is “advanced, progressive and expected to cause death” and that “they are suffering intolerably in relation to the relevant conditions” (S11(1)(b) and (c))

The ACT Act provides significant detail on how “advanced” and “suffering” are to be interpreted, including that the anticipation of suffering as the disease progresses meets the criteria of suffering. The medical condition is defined as “advanced” when the person’s functioning and quality of life have declined - or are declining - and are not expected to improve. There is ongoing discussion about how the VAD Act in the ACT will be interpreted when the guidelines are published later in the year.

Advance requests for VAD

Current laws on Advance Care Directives do not allow VAD to be nominated as an end of life treatment. VAD can only be requested under Australian laws by the person themselves while they have capacity. The Advance Care Directive only comes into operation after a person has lost decision making capacity.

Canada and the Netherlands both allow an advance request for VAD (see [Factsheet 51](#)). The evidence from both countries is that very few people are able to use VAD once they lose capacity. After two decades in the Netherlands, for example, eight of the 9086 people who used VAD in 2023 had lost capacity (328 of the 9086 VAD deaths were people with dementia, but who still had

capacity). Doctors are reluctant to proceed with VAD when there is difficulty in determining whether the person is suffering “intolerably”.

Given the challenge in being able to use VAD if you have dementia, VADSA has developed the Dementia Insert to assist people when preparing their Advance Care Directive. Your Substitute Decision Maker will not be able to request VAD on your behalf, as explained above, however the detail in the Dementia Insert provides more specific guidance on the treatment you wish to be provided and under what conditions, as well as the conditions under which you do not wish that treatment to be provided. The Dementia Insert describes different situations which may arise as your disease progresses and then guides you through your preferences for how your treatment should proceed.

The Dementia Insert is available [here](#).

Due to the importance of working towards making VAD an end of life choice for a person with dementia, VADSA has developed a [VAD and Dementia](#) page on our website. This page will be regularly updated as more evidence emerges.

Step 1 in our campaign to have VAD as an end of life choice for a person with dementia is to follow the ACT lead and remove prognosis from the VAD criteria.