

# MND treatment

Sir, Invasive ventilatory support of patients with motor neurone disease (MND) is unusual in the UK (letter, Feb 12). The evidence is finely balanced on the impact of quantity of life versus quality of life. Invasive ventilation is also complex, costly and time-consuming to establish. An individual's decision turns on our joint approach to balance what people hope for, or may fear, with the costly personal burdens that may come from different supportive treatments such as ventilation by tracheostomy rather than a mask.

When the time comes to stop, ventilation is no different from any other treatment. What is equally clear, and at the heart of the present debate, is that a potential medical duty to end life is very different from a doctor's present duty to care for people as they die and to stop treatments that are futile. That is the hard border for doctors not to cross.

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