

Communicating with Patients and Families about End-of-Life Issues

Management of the Hospitalized Patient
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Objectives

1. Describe core skills for discussing end-of-life issues with patients and their families
2. Observe how these skills can facilitate communication about end-of-life issues
3. Practice using these skills

First, Your Perspective

- Why did you come to this workshop?
- What are you hoping to get out of the workshop?
- What challenges do you encounter when discussing end-of-life issues with patients and their families?

End-of-life communication in the hospital setting

- Most Americans receive care in the hospital setting during the last months of life
- Hospitalization is an opportunity to discuss preferences for end-of-life care
- Historically, communication about end-of-life issues in the hospital setting is poor
- Communication can improve quality of life at the end of life

Dartmouth Atlas of Health Care
SUPPORT JAMA 1995
AHRQ in Action 2003
Wright et al JAMA 2008

Hospitalists and end of life communication

- Most medical inpatients in the United States are cared for by hospitalists
- Most patients with serious illness will be cared for by a hospitalist before they die
- Hospitalists think that end-of-life communication is important
- Residency does not prepare us to communicate with patients and their families

Society of Hospital Medicine
Plauth et al. Am J Med 2001

Why a skills-based approach

- Hospitalists are faced with a wide variety of end-of-life situations
 - Breaking bad news
 - Code status
 - Prognosis
 - Palliative / comfort care
 - Hospice referral
 - ICU family meetings
 - Withdrawal of life support
- There are protocols for each of these
- Core skills will get you through all of them

Goals of end-of-life communication

1. Understand patient / family perspective
2. Make it clear to the patient / family that you understand their perspective
3. Give information clearly
4. Show empathy
5. Align yourself with patient / family

The Skills

Goal	Skills
Understand patient / family perspective	Open-ended questions "Tell me more"
Show you understand	Reflection
Give information clearly	Ask - Tell - Ask
Show empathy	NURSE
Align with patient / family	"I wish"

Back et al CA 2005

Open-ended questions

"What do you understand about your (your mother's) illness?"

"What worries you the most?"

"What are you hoping for?"

THEN LISTEN

"Tell me more"

Daughter: "I don't understand why everyone keeps telling us she's not responding - when I squeeze her hand she squeezes back."

Doctor: "Tell me more."

Reflection

Doctor: "So, if I understand correctly, it seems like you and the doctors aren't on the same page, is that right?"

Ask - Tell - Ask

Patient: "How long do I have to live?"

Doctor (Ask): "I'd be happy to answer that question. First could you tell me what information would help most?"

Patient: "I want to know if I'll be around for my daughter's graduation in May."

Doctor (Tell): "I think that you will."

Doctor (Ask): "Does that answer your question?"

NURSE

Patient: "I just can't stand not be able to take care of myself."

Doctor:

Name: "You sound frustrated."

Understand: "I can understand how you would feel that way."

Respect: "It sounds like you have been so strong through all of this."

Support: "I'll help you to develop a plan."

Explore: "What's the worst part of it?"

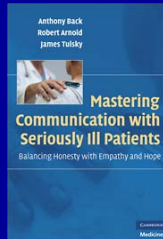
"I wish"

Patient: "I just can't believe there aren't any treatments to cure the cancer."

Doctor: "I wish there were."

Thank you + Further Reading

Mastering
Communication with
Seriously Ill Patients:
Balancing Honesty with
Empathy and Hope
Back A, Arnold R,
Tulsky J
New York: Cambridge,
2009.



References

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<http://www.dartmouthatlas.org/index.shtm>
- Society of Hospital Medicine Press Release 2007
<http://www.hospitalmedicine.org>
- Plauth et al. Hospitalists' perceptions of their residency training needs: results of a national survey. *Am J Med* 2001;111:247-54.
- Kass-Bartelmes BL, Hughes R. Advance Care Planning: Preferences for Care at the End of Life. Agency for Healthcare Research and Quality Research in Action 2003
- Back et al. Approaching difficult communication tasks in oncology. *CA Cancer J Clin* 2005;55:164-77.

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