Palliative care in an Intensive Care Unit

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Introduction

- Definition palliative care and intensive/critical care
- Literature review palliative care on an ICU
  - Decision-making
  - Family support
  - Symptom management
- Role of the consultation team palliative care
- Outcomes of qualitative study with nurses from the ICU Rijnstate hospital by Josien Schoo
Definition palliative care

- Approach that improves quality of life of patients and their families
- Facing problems associated with life-threatening illness
- By prevention and relief of suffering through early identification, assessment and treatment of problems
- Physical, psychosocial and spiritual problems
Palliative care can be provided in any patient setting

By an interdisciplinary team

Including ICU
Definition intensive care

- Provides comprehensive and continuous care for persons who are critically ill and who can benefit from treatment
Literature review

- USA: 20% of all deaths occur on an IC
- Most IC deaths follow a decision to forgo life-sustaining treatment
- Most of the cases patients have no desicional capacity (less than 5%)
- Family members play an important role in daily desicion-making
Patient orientated in the IC includes family orientated
Literature review

- Importance of palliative issues in intensive care
  - Frequency of death
  - Unpredictability of death
  - Complex technology
  - Interdisciplinary decision-making
  - Threat of discomfort, distress and loss of dignity
Literature review

- Decision-making ICU often difficult
  - Culture IC is saving lifes
  - Transition from curative to palliative care is often sudden and in a short time
  - Dying process more dramatic and in a shorter time
  - Unstable situation
  - Great variety between clinicians and nurses about goals of care
  - Nurses think often sooner about withdrawl life-sustaining therapy
Family support on an ICU is complex

- Studies show that the needs of family are inconsistently met
- Universal problem
- Improving communication can reduce family member symptoms
- Nurses play an important role
Literature review

• Important issues for family support
  
  ○ Desire for information exchange
  
  ○ Timely communication about prognosis and goals of care
  
  ○ Timely communication about withdrawing curative interventions
Literature review

- Good clinician-family communication
- Support for surrogate decision makers
- Majority of improving family satisfaction is under direct control of clinician/nurse
- Routine palliative care consultation (quality of care and cost effective)
Communication on an ICU

- Family rate communication one of the most important skills of a clinician
- As most important as clinical skills
- 70% talking and 30% listening
- Satisfaction family higher when clinician talks less and listens more
- All team members must be informed about medical situation and goals of therapy
• Important issues for communication ICU

- Family meeting important place for communication
- Choose the right time and early in the process
- Use a structured way to lead a family meeting (VALUE)
  - V= Value statements made by family
  - A= Acknowledge family emotions
  - L= Listen to family members
  - U= Understand the patient as a person
  - E= Elicit questions from family members
Important issues for communication ICU

- Respond to emotions (NURSE)
- Withdrawl of life-support is not the same as withdrawl care
  - N = Naming
  - U = Understanding
  - R = Respecting
  - S = Supporting
  - E = Exploring
Literature review

- Symptom management on an ICU
  - Not optimal, has to be improved
  - Symptoms best assessed through direct communication
  - Most patients are sedated, more complex
  - Lack of knowledge about symptom management in the last days of life


Literature review

• Symptom management

  ○ Shortness of breath, pain, anxiety, delirium
  ○ Balance between goals of comfort and goals of intensive care
  ○ Current use of analgesics and sedatives do not hastening death
  ○ Alleviation of pain and suffering is crucial for good quality of end of life care
Intensive care nurse

- Symptom management patient
- Communication within the team
- Communication process with patient and family
- Supporting family
- End of life care during last hours
- Fore front of integrating both types of care
Consultation team palliative care

- Respect for the ICU team
- Understanding and honoring perspective ICU clinicians and nurses
- Find a way to identify ICU patients who need palliative care
- First educate basic elements of palliative care
Consultation team palliative care

- Second educate the ICU team in identifying palliative care patients, symptom management, communication, bereavement and grief family
- For more complex situations advice the ICU team
Palliative care on the ICU of Rijnstate hospital
Qualitative study

- Descriptive and qualitative study from November 2009 – March 2010
- Semi structured interviews with 8 nurses from IC Rijnstate hospital
Qualitative study

- Analyzing data in a structured manner using Kwalitan software

- Phases in analyzing
  - Open encoding
  - Axial encoding
  - Selective encoding
Qualitative study

- 3 main themes
  - Withdrawing life-sustaining therapy and stopping curative treatment
  - Alleviating symptoms and providing comfort for the patients (symptom management and supporting the process of dying)
  - Support for family on an ICU (attending and informing family by nurses, doctors and other healthcare deliverers)
Palliative care on the ICU of Rijnstate hospital includes namely:

- Management of symptoms
- Providing support to the patient to make the process of dying as comfortable as possible
- Offering support and giving information to the patients family
The conclusion matches with a few key points of the definition of palliative care by the WHO (2002):

- Affirms life and regards dying as a normal process
- Intens neither to hasten or postpone death
- Provides relief from pain and distressing symptoms
- Integrates the psychological and spiritual aspects of patient care
- Offers a support system to help the family cope during the illness and in their own bereavement
- Uses a team approach to address the needs of patient and family
Recommendation

- Implementing a protocol for palliative care for patients on the ICU
- Palliative care more earlier in the process
- More study on the ICU in how family experiences the decision-making process and the dying of their loved one
The end

- Education is a powerfull tool
- Palliative care not only for the actively dying patient
- More research is necessary to understand palliative care on an ICU
- Impact of palliative care on an ICU
  - Length of stay
  - Costs
  - Family satisfaction
The end