Perspective of “Good Death” in Older Patients and Physicians of Siriraj Hospital

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Background: Good death is a crucial part in palliative and end of life care. Nevertheless, some components of care in composition of good death differ among different culture, social background and possibly age-group. In recent years, concepts of palliative and end-of-life (EOL) have been distributed widely in Thailand. Previous study showed some different opinions between patients and physicians in their concepts of care regarding ‘good death’.

Objective: We aimed to explore opinions regarding EOL care from patients and physicians and to compare the difference between their opinions and trend of change over a 7 year period.

Methods: We conducted a cross sectional study using thirteen-situation-based questionnaire which was developed from literature reviews and experts’ opinion to explore perspectives on EOL care. Participants were older patients who attended outpatient department and physicians in training at Siriraj hospital. The results were compared between groups and with similar studies during the past 7 years. Moreover, we compared physicians’ preferences of EOL for themselves and older patients.

Results: Three hundred and fifty-two patients and 293 physicians were recruited in this study. Some general concepts, such as wishing to know the truth regarding disease prognosis and to have suffering symptoms to be treated holistically, were all rated as important for most participants in both groups. Compared to previous studies, higher proportion of older patients wished to be involved in decision making for their own illness. (73.0% vs 88.9%, p= 0.01). In this study, higher proportion of physicians agreed with patients regarding the wish for not to prolong suffering when the chance of survival was slim (83.2% vs 71.0 %, p <0.001). When elicited opinion for their own EOL, higher proportion of physicians agreed for most components in the questionnaire, particularly on prolonging the suffering.

Conclusion: There are many different opinions regarding the wish towards EOL care between patients and physicians. However, the gap has been narrow over the past 7 years. Current scheme to promote knowledge regarding palliative and end of life care appears to be successful. The gap might be closed with having more communication with patients.

Keywords: Good deaths, Palliative care, End of life care, Elderly