

End-of-life discussions do not affect survival rates, study shows

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Discussing and documenting patients' preferences for care at the end of life does not cause them any harm, contrary to recent claims. A new study published today in the *Journal of Hospital Medicine* found that patients who talk with their physicians about end-of-life care and have an advance directive in their medical record have similar survival rates as patients who do not have these discussions and documents.

The study included 356 patients admitted at three different hospitals who had low or medium risks of dying within one year. Patients were followed from 2003 to 2009. During the study, there were no differences in survival for patients who had an end-of-life discussion and those who had not; there also were no survival differences for those who had a living will in their medical record and those who did not.

"Our findings are reassuring. They support [health care providers](#), who can initiate these discussions, and policy makers, who seek to reimburse these time consuming discussions," said lead researcher Stacy M. Fischer, MD of the University of Colorado School of Medicine. "Most importantly, our findings are reassuring for patients and families who desire these discussions with their health care providers."

"The term 'death panels' has sparked considerable controversy recently. It has undermined the efforts of clinicians who provide end-of-life care by scaring patients into thinking that their lives may be cut short for their families' or society's best interest," added Fischer. "We hope our study provides data to help inform the national debate about [advance directives](#)

for key stakeholders; health care providers, policy makers, and patients and families."

Provided by Wiley

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