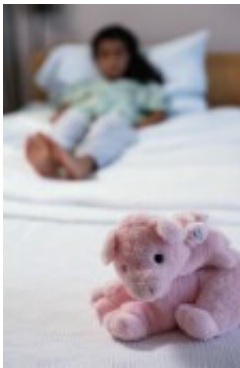


Barriers identified to pediatric advance care discussions

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(HealthDay) -- Prognostic understanding and parental attitude are significant barriers to advance care discussions (ACD) for children with life-threatening conditions, according to a study published online March 5 in *Pediatrics*.

Amy Durall, M.D., of Children's Hospital Boston, and colleagues analyzed survey results (54 percent response rate) from physicians (107) and nurses (159) involved in pediatric clinical care in practice settings where advance care planning takes place.

The researchers found that the top three barriers were unrealistic parent expectations, differences between clinician and patient/parent understanding of prognosis, and lack of parent readiness to have the

discussion. Some differences existed between physician and nurse responses, with nurses significantly more likely than physicians to identify lack of importance to clinicians and ethical considerations as impediments. Physicians were significantly more likely to respond that not knowing the right thing to say was more often a barrier. Response differences also existed by specialty, with [cardiac intensive care](#) unit providers more likely to report unrealistic clinician expectations and differences between clinician and patient/parent understanding of [prognosis](#) as common barriers to conducting ACD. Most clinicians (71 percent) believed that ACD happen too late in the patient's clinical course.

"[Clinicians](#) perceive parent prognostic understanding and attitudes as the most common barriers to conducting ACD," the authors write.

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