

Doctors reluctant to discuss end-of-life care with heart failure patients

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Healthcare providers are reluctant to discuss end-of-life care with heart failure patients and their families because they feel uncomfortable broaching the topic or lack time, according to a new study presented at the Quality of Care and Outcomes Research 2014 Scientific Sessions.

Researchers surveyed 50 physicians and 45 nurse practitioners or physician assistants at three practices at the Mayo Clinic in Rochester, Minnesota and the Mayo Clinic Health System. Ninety-five clinicians completed the survey.

Among the findings:

- Only 12 percent of the <u>healthcare providers</u> reported having routine yearly discussions about end-of-life care as advocated by the American Heart Association.
- Thirty percent of the group reported having little confidence in discussing or providing end-of-life care.
- Among the 52 percent who said they felt hesitant mentioning end-of-life-care, 21 percent cited their perceptions that patients weren't ready to talk about the issue; 11 percent said they felt uncomfortable bringing it up; 9 percent said they worried about destroying a sense of hope; and 8 percent said they lacked time.

Healthcare providers were often unsure about who should bring up endof-life care: 63 percent of heart failure specialists and 58 percent of community cardiology clinicians thought end-of-life care discussions



were the responsibility of heart failure cardiologists, while 66 percent of primary care providers felt it was their responsibility.

Despite these perceptions, heart failure specialists and community cardiology clinicians were far more likely to have referred <u>heart failure</u> <u>patients</u> to palliative care within the past year than <u>primary care</u> <u>physicians</u> (89 percent versus 21 percent).

"Providers did express an interest in receiving additional training to develop the skills and confidence to talk about end-of-life care with their patients with heart failure," said Shannon Dunlay, M.D., M.S., the study's lead researcher and a cardiologist at the Mayo Clinic in Rochester, Minnesota.

There is no evidence that bringing up <u>end-of-life care</u> ruins hope, and it may ease anxiety for some patients and families, Dunlay said.

About 5.1 million Americans have <u>heart failure</u> and about half of those die within five years of their diagnosis, according to American Heart Association statistics.

"Communication is key but in many hospitals and health systems this can be difficult as patients often have multiple healthcare providers," Dunlay said. "Sometimes it's helpful to pick up the phone and have a provider-to-provider conversation so that everybody is on the same page. Incorporating end-of-life conversations into the ongoing, routine care of the patient is important as goals and preferences can change over time and patients and their families can feel more comfortable and confident in relaying their wishes to multiple providers."

Provided by American Heart Association



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