

More individuals discussing end-of-life wishes with loved ones

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Discussing end-of-life wishes with loved ones can be difficult, but new research from the University of Missouri shows more individuals are engaging in advance care planning. Advance care planning includes discussing end-of-life care preferences, providing written end-of-life care instructions and appointing a durable power of attorney for health care.

"Advance care planning increases the likelihood that the care one receives at the end of her life is congruent with what she wants," said lead author Nidhi Khosla, an assistant professor of health sciences in the MU School of Health Professions. "By engaging in advance care planning, individuals make their preferences known in the event that they are unable to make a decision for themselves. This can reduce the stress caregivers and family members face regarding treatment decisions for a loved one who is severely ill or injured."

Khosla and her MU colleagues, Angela Curl and Karla Washington, investigated the trends in advance care planning from 2002 to 2010 using data from the Health and Retirement Study, a nationally representative U.S. sample of individuals who are 50 years or older. They found that engaging in advance care planning was not strongly linked to socioeconomic status or level of education. However, they found that individuals with higher household incomes were more likely to have legally designated someone to make [health](#) decisions on their behalf in the event they could not make the decisions for themselves.

"It's likely that local and national efforts to inform citizens about the importance of advance care planning are working," said Curl, an assistant professor in the MU School of Social Work. "The good news is that we are making progress as a society, and economic discrepancies do not appear to be factors. We don't want an income or education gap to prevent people from engaging in [advance care](#) planning."

Previous research has shown [advance care planning](#) leads to fewer hospitalizations at the end of life and reduced duration of hospitalizations, which is consistent with the preferences of many people, Khosla said.

"When individuals share their end-of-life preferences with loved ones, they're more likely to have their wishes honored," Khosla said.

More information: "Trends in Engagement in Advance Care Planning Behaviors and the Role of Socioeconomic Status," will be published in the *American Journal of Hospice and Palliative Medicine*.

Provided by University of Missouri-Columbia

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