

# Language matters in end-of-life conversations

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Connie M. Ulrich, PhD, RN, FAAN, the Lillian S. Brunner Chair in Medical and Surgical Nursing and Professor of Nursing. Credit: Penn Nursing

In general, the term "medical futility" applies when, based on data and professional experience, no further treatments, procedures or tests will provide benefit and may, in fact, be more burdensome and create undue suffering for the patient and the patient's family.

As expected, discussing futility at end of life is complex and emotionally draining for patients, families, and clinicians. Because it is often used imprecisely, the term "futile"—and newer terms including "potentially inappropriate"—can cause confusion and result in disagreements about [end-of-life care](#). A University of Pennsylvania School of Nursing (Penn Nursing) perspective article cautions that care must be taken by clinicians to guard against the misuse of language when guiding patients and families on death and dying.

"The reconceptualization of futility language requires further clarification and analysis of how newer terms impact the [patients](#) and families who rely on their clinicians for expert care and compassion at end of life," wrote author Connie M. Ulrich, PhD, RN, FAAN, the Lillian S. Brunner Chair in Medical and Surgical Nursing and Professor of Nursing. The article, "End-of-Life Futility Conversations - When Language Matters" has been published in the journal *Perspectives in Biology and Medicine*.

"How [clinicians](#) use words to give meaning to the dying process for those who are seriously ill can be a salve that is long remembered amidst the initial disbelief and grief suffered by so many," wrote Ulrich.

**More information:** Connie M. Ulrich. End-of-Life Futility Conversations: When Language Matters, *Perspectives in Biology and Medicine* (2018). [DOI: 10.1353/pbm.2018.0020](https://doi.org/10.1353/pbm.2018.0020)

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