

Potential overtreatment during life-limiting illness and end of life in older adults

October 31 2023, by Gunilla Sonnebring



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A new thesis from Karolinska Institutet advocates end-of-life care that prioritizes the highest possible quality of life, avoids unnecessary or preventable risks and respects patient wishes.

In his thesis, Ph.D. student Máté Szilcz at the Department of Medical Epidemiology and Biostatistics, delves into the complexities of aging and end-of-life care, particularly focusing on potential overtreatment in [older adults](#) with life-limiting illnesses. As death nears, the focus of medical care typically shifts from prolonging life to managing symptoms and providing comfort. Treatments that take a long time to show benefits become less relevant, especially for older individuals.

Yet, such treatments, termed potential overtreatment, are frequently continued for patients nearing the end of their lives. The research, conducted using nationwide health care data, explores the prevalence, patterns, and consequences of potential overtreatment.

The thesis includes four studies, covering topics such as potential overtreatment in older individuals with solid cancer, patterns of unplanned hospitalizations in the last year of life, the initiation and continuation of endocrine treatment for [metastatic breast cancer](#), and the consequences of a drug-drug interaction in individuals with life-limiting illness.

What are the most important results in your thesis?

Szilcz: Our findings suggest that a significant proportion of older adults with life-limiting illnesses may experience potential overtreatment at the end of life.

Why did you become interested in this topic?

I became interested in studying the topic of overtreatment at the end of life because of a [personal experience](#). When my grandfather was diagnosed with a [terminal illness](#), I witnessed the challenges and complexities of navigating health care decisions during this critical stage.

The experience raised questions about the balance between providing comfort and dignity to the dying, and the tendency within our health care system to pursue aggressive treatments that may offer little benefit but can significantly diminish quality of life. This sparked a desire to explore the concept of overtreatment in [end-of-life care](#), and to advocate for more informed and compassionate approaches that prioritize the patients well-being and preferences.

What do you think should be done in future research?

Future research efforts are required to keep and continue growing the momentum of overtreatment research. In my opinion, research should primarily focus on establishing the harmful effects of potential overtreatment (e.g., drug-drug interactions, hospitalizations, potentially inappropriate medications) on health in older adults at the end of life. If overtreatment is not only futile, but also leads to negative outcomes, the inclination to intervene will be strengthened within different parts of the health care system.

More information: Potential overtreatment during life-limiting illness and end of life in older adults. hdl.handle.net/10616/48791

Provided by Karolinska Institutet

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