

Talking to doctors about your bucket list could help advance care planning

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For physicians, asking patients about their bucket lists, or whether they have one, can encourage discussion about making their medical care fit their life plans, according to a study by researchers at the Stanford University School of Medicine.

A bucket list is a list of things you'd like to do before you die, like visiting Paris or running a marathon. It's a chance to think about the future and put lifelong dreams or long-term goals down on a piece of paper.

For doctors, knowing their [patients'](#) bucket lists is a great way to provide personalized care and get

them to adopt healthy behaviors, said VJ Periyakoil, MD, clinical associate professor of medicine, who said she that she routinely asks her patients if they have a bucket list.

"Telling a patient not to eat sugar because it's bad for them doesn't work nearly as well as saying, for example, if you are careful now, you will be able to splurge on a slice of wedding cake in a few months when your son gets married," Periyakoil said.

The study will be published Feb. 8 in the *Journal of Palliative Medicine*. Periyakoil, an expert in geriatrics and palliative care, is lead author.

The researchers, who surveyed 3,056 participants across the United States, found that by far the majority of respondents—91 percent—had made a bucket list. Survey results also showed that respondents who reported that faith and spirituality were important to them were more likely to have made a bucket list. The older the respondents were, the more likely they were to have a bucket list, and, not surprisingly, those younger than 26 tended to include more "crazy things" on their lists, such as skydiving.

Bucket list categories

Six general themes tended to describe the items on respondents' bucket lists: 79 percent included travel; 78 percent included accomplishing a personal goal, such as running a marathon; 51 percent included achieving a [life](#) milestone, such as a 50th wedding anniversary; 16.7 percent included spending quality time with friends and family; 24 percent included achieving financial stability; and 15 percent included a daring activity.

"When you just Google the term 'bucket list,' it's huge how much interest there is in this," Periyakoil said. "It provides a very nice framework for thinking about your life goals, health and your mortality."

Past research has found that when doctors talk to patients—especially those with chronic or terminal illnesses—about the patients' goals for future care, it can be a vital part of the advance-care planning process. But it's often awkward to have these conversations, particularly when they are about the end of life, the study said.

More information: Vyjeyanthi S. Periyakoil et al, Common Items on a Bucket List, *Journal of Palliative Medicine* (2018). DOI: 10.1089/jpm.2017.0512

"If a patient wants to attend a beloved grandchild's wedding or travel to a favored destination, treatments that could potentially prevent her from doing so should not be instituted without ensuring her understanding of the life impact of such treatments," the study said.

Provided by Stanford University Medical Center

Discussing a patient's bucket list is just a good way to start these conversations, Periyakoil said. Most people are far more open to talking about their life's goals in this context before filling out an advance directive, a written statement of a person's wishes regarding medical treatment at the end of life, Periyakoil said.

'Find out what actually motivates them'

"It's important for physicians to talk to patients and find out what actually motivates them," she said. She encourages both doctors and patients to bring up the topic of a bucket list. By discussing how a treatment or surgery might affect the patient's life, and then discussing what the patient's goals are, the best possible care plan can be laid out, she said.

"I had a patient with gall bladder cancer," Periyakoil said. "He was really stressed because he wanted to take his family to Hawaii but had treatment scheduled. He didn't know he could postpone his treatment by two weeks. When doctors make recommendations, patients often take it as gospel."

After an informed discussion about his options and the side effects of the cancer treatments, he and his physician decided to postpone the [treatment](#). He made the trip to Hawaii with his family, then returned to start cancer treatments, the study said.

"Patients don't see the relevance of an advance directive," said Periyakoil. "They do see the relevance of a bucket list as a way to help them

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