Advance Directives – What do they really mean?

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Advance Care Directives – What do they really mean?

• Let Me Decide has a proxy and instructional component.

• **Proxy** allows individuals to name another to make decisions on their behalf in the event of incompetence later.

• **Instructional** component allows individuals to choose treatments for specific conditions
What do we know about Advance Care Directives?

- Number surveyed: $n = 959$
  - Doctors, Nurses, Allied Health Professionals, Medical and Nursing students
- Median age: 33 yrs (range: 18-82yrs)
- Median age of professionals: 41yrs
- Gender: 31% male
- Countries surveyed:
  - Ireland: 757 surveyed
  - UK: 95 surveyed
  - Canada: 107 surveyed (median age 55*, 45% male)
What are our knowledge and attitudes of ADs

• National Irish study (J. McCarthy et al. J. Med Ethics, 2010)
  – General Public telephone survey, n = 667
  – 71% had never heard of an Advance directive
  – 46% had never heard of a Living Will
  – 5% claimed to have drafted an ACD!

• Our survey
  – 80% had heard of them (84% of professionals)
  – 92% would act as a proxy
  – 91% agreed they were a good idea
  – 75% would recommend people to complete an AD
Health Care Professionals own Wills or ACDs

Percentage

Canada | Ireland | UK

Have a Will | Have AD

Ireland

UK
No Directive Scenario

• 82 year – old man brought to emergency room with gastrointestinal bleeding. Had vomited blood and had passed a melanic stool.

• Patient was stuporous, diaphoretic, understood only simple commands and answered simple questions incorrectly.

• Heart rate: 120 beats/min; blood pressure 70/40 mm/hg.

continued …
No Directive Scenario  (cont’d)

• Patient had been diagnosed with Alzheimer’s Disease three years earlier.

• Needed assistance with ADL’s, had difficulty remembering names and sometimes failed to recognize his daughter.

• Patient incontinent of urine all of the time and incontinent of stool part of the time.

• Only living relative and patient’s physician could not be reached.
If this was **your patient**

- **Palliative**
- **Limited**
- **Surgical**
- **Intensive**

Percentage choosing this level of care
If this was your Father

Percentage choosing this level of care

- Palliative
- Limited
- Surgical
- Intensive

Father
If this was your self

Percentage choosing this level of care

- Palliative
- Limited
- Surgical
- Intensive

Self
We choose differently for our patients than we would for ourselves or our family.

Percentage choosing this level of care

- Palliative
- Limited
- Surgical
- Intensive

Legend:
- Patient
- Father
- Self
Choices for patient in differing professions for given case 2012

Percentage

Doctor  Nurse  AHP  Student

Palliative  Limited  Surgical  Intensive
Choices for themselves in differing professions 2012

- Doctor
- Nurse
- AHP
- Student

Percentage

Palliative | Limited | Surgical | Intensive
--- | --- | --- | ---
Doctor | Nurse | AHP | Student

0 10 20 30 40 50 60 70 80 90

Percentage
CPR and Tube feeding for case given

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<th>Doctor</th>
<th>Nurse</th>
<th>AHP</th>
<th>Student</th>
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<td>30</td>
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<td>Tube feeding</td>
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CPR and Tube feeding for themselves

Doctor  Nurse  AHP  Student

Percentage

CPR
Tube feeding
Estimation of successful CPR by profession

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<td>21-50%</td>
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Estimated survival with CPR
Why make an Advance Directive

- 38% felt they would get Rx inconsistent with their (unexpressed) wishes
- 39% felt they would be overtreated
- 21% felt they would be undertreated
- 61% felt their family would have trouble deciding

- If they became incapable most still wanted their families rather than doctors to make decisions
Why make an Advance Directive

• 62% felt their family should be allowed to make a form of AD for them

• More Canadians felt comfortable following ADs
  – 93.2% (C) vs 77% (Irl & UK) p<0.001
  – ? Due to more experience with them, and different legal status

• Most felt a doctor would follow an AD
  – 75% of total group agreed
  – 61% of professionals agreed
    • ~70% in Can or UK vs 57% in Irl
Conclusion

• Treatment varied widely between countries
• Treatment varied widely between professions
• Treatment varied depending on whether you were choosing for a patient, relative or oneself
• Reflect differences in values and lack of societal consensus
• Need for increased awareness of advance directives