

REALITY CHECK: Life is 100% fatal. Let's talk about it

Guest Editorial

Micki Jackson

Community and Patient Advocate

Out-patient palliative care, advance care planning

Bellingham, WA

If you are 18 years or older, one of the biggest gifts you can give yourself and those you love, is to "make your wishes known" regarding medical care you'd want, before a crisis develops and you could not communicate those wishes yourself.

Serious illness or accident can occur at any age. **The Realities of Advanced Medical Interventions** presentation supports good decision-making -- presented in easy-to-understand layperson's terms. **Realities** is a conversation starter to help you prepare to talk to your family, friends, and your medical providers, to express your end-of-life care wishes that align with your goals, values, and personal beliefs.

There is a common erroneous assumption, attributable in part to television and movies, that CPR (cardiopulmonary resuscitation) is routinely an enormous success. CPR certainly has its place in the medical armamentarium. However, when CPR is used as intended, it can break ribs, especially in the frail elderly. A broken rib can puncture a lung; can cause internal bleeding; can lead to pneumonia. Consistently, people still do not understand exactly what CPR is, what it's for, and what its risks and benefits are.

The origins of CPR date back centuries. But it was only in 1960 that CPR, in its current form was introduced into American medicine, initially as treatment for sudden cardiac arrest after heart attacks, drowning, drug overdoses, and other potentially reversible conditions. The American Heart Association started a program to acquaint physicians with close-chest cardiac resuscitation and became the forerunner of CPR training for the general public.

Yes, CPR is a lifesaver. But, it is not without drawbacks, especially for those with chronic conditions and terminal illnesses -- serious long-term consequences also include brain damage resulting from extended oxygen deprivation. Sound arguments are made that patients with a very low likelihood of returning to a reasonable quality of life, who are given CPR, are subjected to an unnecessarily prolonged and painful death.

Patients significantly overestimate CPR's likelihood of success. The **Realities** talk explains CPR outcomes, in the short and the long term. When older adult patients are told the true probability of survival, pegged to quality of life, they are half as likely to want CPR. There is much to clarify! CPR is one of the few treatments that patients must expressly opt out of instead of opting in to -- that fact, carries a burden of explanation. **Realities** addresses that burden. Other interventions covered in **Realities** include intubation, feeding tubes, intravenous drugs to raise LOW blood pressure, mechanical ventilation, and dialysis.

If a person has not "had the conversation" regarding their wishes, selected a strong, reliable healthcare proxy who will advocate for them, and ideally documented those choices in an Advance Directive, the default mode in our country is to go full-steam ahead with aggressive interventions, even if there is virtually no chance the patient will return to meaningful survival.

Doctors, nurses, family members, close friends suffer incredible moral distress in the intensive care unit (ICU) when advance care planning has not been addressed before a crisis develops. In these situations, the healthcare community too often embarks down the road of "do everything" knowing people have no clue what that means and that it likely will not bring a return to former health. Moral distress is exacerbated by the fact that insurmountable medical bills are the leading cause of bankruptcy in our country.

I imagine the day when these conversations are firmly woven into our community -- and national -- fabric. Many of us seek a cultural shift in our country, that it is imperative we accept our mortality. We will be a healthier, more enlightened society when we face the fact that life is 100% fatal.

No one is getting out of here alive, so let's talk about it! Your loved ones and your professional medical providers will thank you for it.

When people complete their advance directive, they report renewed zest for LIVING!