

NON ACCEPTANCE OF PALLIATIVE CARE BY TRADITIONAL FAMILIES OF PATIENTS ON DIALYSIS

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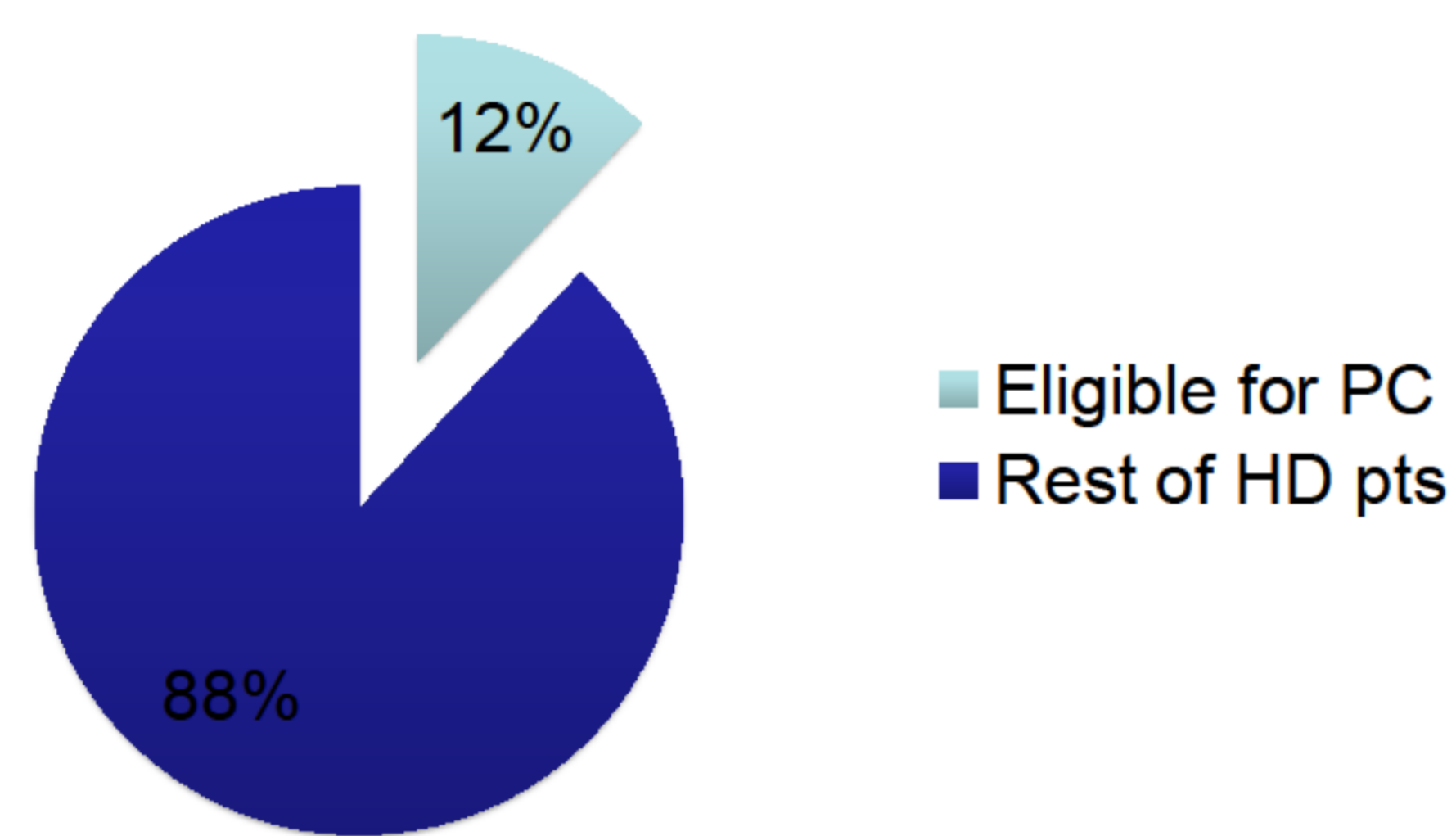
Objectives:

Despite its availability, Palliative Care is underutilized in the care of terminally ill ESRD patients. In this study we tried to address some additional aspects of this issue, especially the process of making decisions.

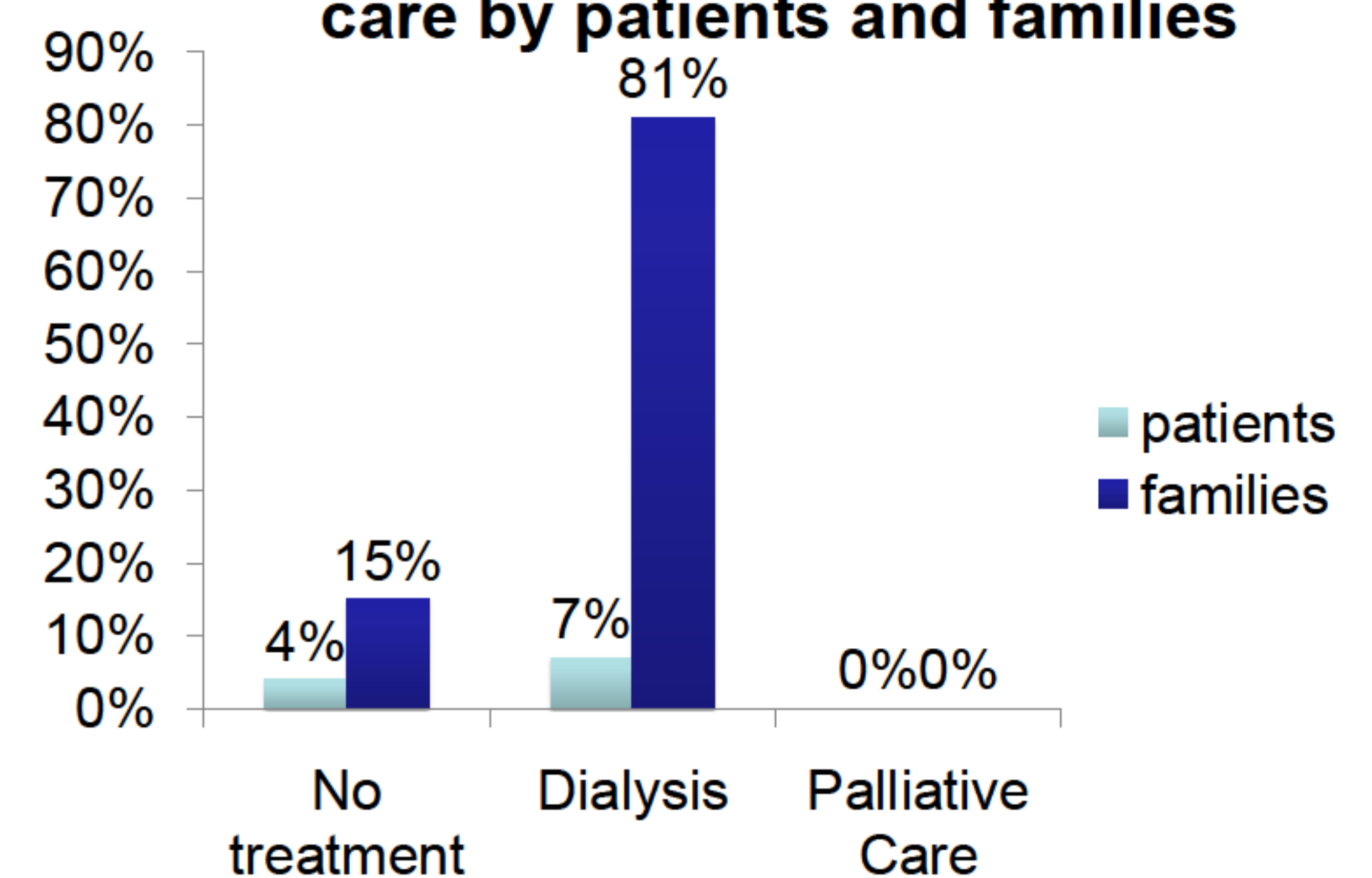
Methods:

- We observed the impact of the traditional family relationships, feeling of guilt and being a burden on the family as factors on final decision.
- In the 3 years period between 2009-2012, 232 patients were dialyzed in our center.
- As eligible patients for PC were considered
 - those who had a very poor prognosis,
 - those with a terminal illness from non-renal causes,
 - significant co-morbidities and
 - whose medical condition would interfere with the technical process of dialysis because the patient was unable to cooperate.

Patients proposed to be further treated with Palliative Care



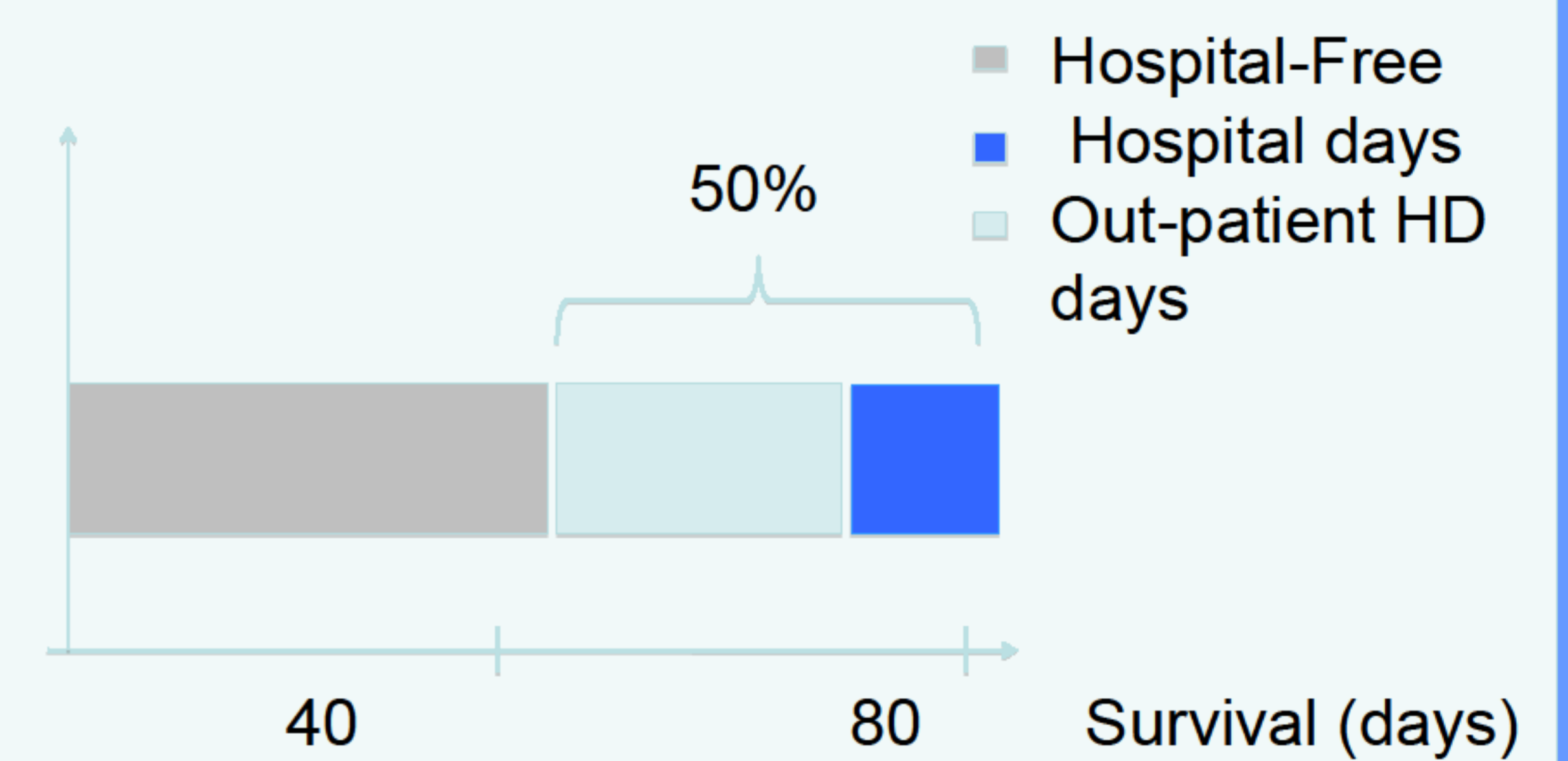
Decision making on Palliative care by patients and families



Results:

- 27 (12%) patients aged from 41 to 88 years, were proposed and none of them choose palliative care. Not to be dialyzed and treated anymore was decision made by 1 patient and 4 families for patients unable to decide.
- In 96 % of decision making the patient left the family to decide.
- Three patients felt as burden for the family.
- Families consisted of 1-7 members (mean 3.7) and all of them demonstrated feeling of guilt as main reason for rejecting Palliative Care.
- Different religion did not affect decision. 33% of families were well educated and with good socio-economic status.
- The mean survival time of the group, which continued dialyzing, was 86 ± 52 days, and 50% of that time was spent in hospital. In 75% of patients fistula was created.

50% of the Survival time was spent in hospital including dialysis



Conclusions:

Negative attitude towards discontinuing dialysis relies on deep family relations and reflects traditional non-western society.

References:

Lamping et al. Clinical outcomes, quality of life, and costs in the North Thames Dialysis Study of elderly people on dialysis: a prospective cohort study. The Lancet, 2000; Vol.356 :1543 – 1550

Fasset et al. Palliative care in end-stage renal disease. Nephrology16 (2011) 4-12

