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Factors That Enable or Complicate End-of-Life Transitions in Critical Care

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Abstract

- **Background** Nurses in medical intensive care units are routinely involved in negotiations to maintain or withdraw life support. How nurses move from aggressively attempting to extend life to letting life end is not well understood.
- **Objective** To explore nurses' experiences of moving from cure- to comfort-oriented care and to describe factors that inhibit or facilitate such transitions.
- **Method** A descriptive qualitative research design with brief observation of participants and focus group interviews was used. Participants were 19 female and 5 male nurses in an 18-bed medical intensive care unit in a 719-bed acute care hospital in the northeastern United States.
- **Results** The transition point between cure- and comfort-oriented care was unclear. Nurses reported that the patient's age, misunderstanding of the illness by the patient's family, family discord, and shifting medical care decisions made end-of-life transitions difficult. Conversely, developing a consensus among patients, patients' families, and staff about the direction of medical therapy; exhausting treatment options; and

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patients' lack of response to aggressive medical interventions helped nurses move toward comfort care.

• **Conclusions** The most distressing situations for staff were dealing with younger patients with an acute life-threatening illness and performing futile care on elderly patients. End-of-life transitions were difficult when patients' families had conflicts or were indecisive about terminating treatment and when physicians kept offering options that were unlikely to change patients' prognosis. The most important factor enabling nurses to move from cure- to comfort-oriented care was developing a consensus about the treatment.

Notice to CE enrollees: A closed-book, multiple-choice examination following this article tests your understanding of the following objectives:

1. **Describe nurses' experiences of moving from cure- to comfort-oriented care**
2. **List factors that will inhibit or facilitate transitions from cure- to comfort-oriented care**
3. **List 3 factors that facilitate the transition from cure- to comfort-oriented care.**

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Nurses' perceptions of end-of-life care after multiple interventions for improvement.

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Intensive care nurses' experiences with end-of-life care

KT Kirchoff et al., *Am J Crit Care*

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Jeanie Youngwerth, *BMJ Best Practice*

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