

# Democrat and Chronicle

## Good end-of-life care requires advance planning

PAT HEFFERNAN • GUEST ESSAYIST • AUGUST 9, 2009

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Can someone explain how advance care planning and end-of-life care got twisted up in the health care reform debate?

Working in a hospice program, I know too many Americans die alone or in pain each year, despite advances in medical care. Many incurably ill people still endure ineffective treatments that prolong dying, not life. And many terminal patients only come to hospice a week or less before they die — or not at all.

Surveys show that the most important elements in good end-of-life care are:

- Honoring the dying person's wishes for treatment
- Choice among services a patient can receive
- Pain controlled as the patient wishes
- Emotional support for both patient and family

Sadly, many of us are so reluctant to talk about these topics that families often end up in conflict or confusion when a health crisis hits. It's hard to make good decisions then.

That's what makes advance care planning worthwhile — so adults with decision-making capacity have the information and the opportunity to communicate and document their future health care wishes. Once you discuss what you want with loved ones and your doctor, you can prepare written documents to declare what treatments you do or do not want and to name an "agent" to speak for you if necessary.

Here is the key fact —with advance care planning, you make the choices for your own care. By law, that's your right. Yet fewer than one-third of all Americans have completed an advance directive, even though it can be done easily, for free, without a lawyer. To me, this figure seems shockingly low. Not talking about end-of-life care does not prevent dying!

There are no wrong answers when thinking about health care choices and completing advance directives. When you discuss, decide and document your wishes, it is a great gift to your loved ones and should bring you peace of mind. Look again at that end-of-life care list. Those services are all provided by hospice, but most Americans don't know that hospice care promises us a path to dying pain-free with dignity, with our families receiving support as well.

It is true that the health care expenses of hospice patients are often less than expenses of similar people getting conventional care. But that's not why people enroll in hospice; they do it for access to effective, expert treatment of pain and distress. The focus shifts from curing to caring.

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