

Opinion

Commentary

Planning offers comfort at end-of-life

By Dr. PATRICIA BOMBA

A few months ago, after a lengthy decline in her health, my mother died. In her final weeks she was comfortable in our home and surrounded by those she loved.

As a daughter, I felt the emotional pain of her impending death but found comfort in reflecting on our past conversations and knowing that we were honoring her wishes for how her life would end. As a physician who specializes in geriatrics and end-of-life care, I knew that our experience was far from the norm.

Just three years ago news coverage was dominated by Terri Schiavo, the Florida woman at the center of a family battle over continuing medical care that was keeping her alive. Media attention prompted a nationwide discussion on the importance of making preferences known and legally designating someone to speak for you when you can't speak for yourself.

Unfortunately interest has faded.

Recently, in the most comprehensive survey on end-of-life planning ever commissioned in upstate New York, Univera Healthcare found that few have retained

the lessons of the Schiavo case.

Nearly nine of 10 upstate New Yorkers surveyed said they would want someone close to them making medical care decisions on their behalf if they had an irreversible terminal condition and were unable to communicate or make decisions for themselves. Yet, only 42 percent have designated a health care proxy and just 26 percent have completed a Living Will.

Older members of the survey group were more likely than younger adults to make such plans.

The reality is that the discussion of end-of-life issues should begin when we're young, healthy and independent, and it should continue as our life experiences change and views evolve.

Advance Care Planning is a process that asks individuals to explore, clarify and put in writing their values, beliefs and goals of care. It requires them to name a legal spokesperson, and an alternate, who will work best with health care providers to make decisions on behalf of the patient. And it requires them to complete the necessary legal documents, keep them up-to-date, and make them accessible to their

spokesperson, provider, and others.

Here in New York State the process of Advance Care Planning now involves completing three legal documents; the Health Care Proxy, the New York Living Will and additionally, for seriously ill individuals, the Medical Orders for Life-Sustaining Treatment (the MOLST form).

As a medical professional, I know that Advance Care Planning is important. As the daughter of a parent who has recently died, I know that the planning my mother did in advance of her declining health and the conversations we had made all the difference in the world.

I encourage everyone to visit a free Web site filled with information on Advance Care Planning, including downloadable forms and informational videos; www.compassionandsupport.org. It contains everything you'll need to provide compassion and support at the end-of-life.

Patricia Bomba, M.D., F.A.C.P., is Vice President and Medical Director/Geriatrics for Univera Healthcare and is a nationally recognized expert on Advance Care Planning.