

Nurses play vital role in care of terminally ill patients

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Nurses play a crucial role in decisions surrounding treatment of terminally ill patients.

A University of Queensland study has found nurses play a crucial role in decisions surrounding treatment of terminally ill patients.

UQ School of Social Science Associate Professor Alex Broom said dying [patients](#) who were told further treatment would be futile often turned to [nurses](#) for [emotional support](#).

"The transition to end-of-life care has traditionally been the doctor's decision," Dr Broom said.

"The study shows how important nurses are in

decisions about when life-prolonging treatments should end and in supporting patients and families in the process of accepting that they are dying.

"Nurses often bear the brunt of patient and family grief as the end of life nears.

"Nurses spend so much time with patients that they are often in a better position than doctors to know how patients are really coping with often highly toxic, technically life-prolonging treatments.

"The study found that patients would often put on a brave face when their doctor was present and then ask the nurse to tell the doctor they'd had enough.

"This can put the nurse in a difficult position professionally, placing them as mediator between doctor, patient and often-panicked family members."

Nurses in the study said communicating with patients and families was much easier when doctors had already spoken openly and honestly with patients about the fact that it was time to stop active treatment.

"A major problem for nurses is that some [doctors](#) avoid difficult conversations; even continuing patients on [active treatment](#), while others were rushed or blunt, leaving the nurse to explain the situation and provide emotional support to patients and their families," Dr Broom said.

The study involved 20 Australian nurses from Brisbane hospitals, mostly consisting of cancer nurses.

The study explored their experiences of caring in the context of medical futility.

Nurses in the study emphasised the emotional toll of caring for patients and families at the end of life, the need to balance caring with protecting

themselves from burnout, and the fact that there was very limited debriefing or counselling provided.

"It's not uncommon for a nurse to have to walk out of a room where a patient they have known for months or years has just died, straight into a finance meeting or to treat another patient, without five minutes to themselves to reflect on the previous patient's death," Dr Broom said.

While the nurses discussed the rewards of being involved in the transition to [end-of-life care](#), they emphasised the mounting pressures on the nursing profession to engage in technical, task-orientated work and how this could compromise their capacity to support patients nearing the end of life.

"The results of the study show that nurses play a much greater role than previously thought in decisions about medical futility, and that their role as a crucial mediator and support provider in this context is increasingly challenged by the growing unrealistic expectations placed on nurses working in Australian hospitals," Dr Broom said.

Results of this study were published in the journal *Qualitative Health Research* in October.

More information: "Negotiating Futility, Managing Emotions: Nursing the Transition to Palliative Care." *Qual Health Res* 1049732314553123, first published on September 22, 2014 [DOI: 10.1177/1049732314553123](#)

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