



Effective Health Care

Invasive and Life-Prolonging Critical Care

Results of Topic Selection Process

The nominator for the topic, *Invasive and Life-Prolonging Critical Care*, is interested in the relationship between informed consent and patient decision-making related to invasive and life-saving measures in critically ill adults. The nominator is interested in a multi-center randomized trial examining the relationship, and hypothesizes that patients who are fully informed of the risks and benefits of, and alternatives to critical care will have a higher sense of autonomy and are more likely to opt out of invasive, life-prolonging therapies or interventions (ie, CPR and mechanical ventilation), and this will, in turn, decrease length of stay and hospital costs.

This area of research is currently undeveloped, and primary research is needed to investigate the correlation between informed-consent and patient decisions regarding life prolonging critical care; thus, it cannot be addressed by a systematic review and falls outside the domain of the EHC program. No further activity will be undertaken on this topic.

Nomination

Topic Number: 0448 **Received On:** 02/28/2012

Topic Name: Invasive and Life-Prolonging Critical Care

Nominator: Physician

Nomination Summary: The nominator, a physician, is interested in a multi-center trial randomizing critically ill adults to receiving informed consent (ie, risks, benefits, and alternatives to critical care) or usual care. The nominator hypothesizes that participants receiving informed consent will experience enhanced autonomy, and that the intervention will prevent unwanted invasive procedures and reduce hospital costs. The nominator believes that the ethical and economic impact of a study investigating and informing guideline priorities on properly implementing informed consent and abiding by the patients' resultant decision would be significant.

Key Questions from Nomination:

Key Question 1: What is the relationship between fully informing a patient of the risks and benefits of and alternatives to invasive and life-prolonging critical care and the patients' sense of autonomy and resultant directive?

Original Nomination

Topic Suggestion Description

Date submitted: 02/28/2012

Briefly describe a specific question, or set of related questions, about a health care test or treatment that this program should consider.

Abundant data suggest that if elderly and ill patients are fully informed of the risks, benefits and alternatives of invasive, life-prolonging critical care (including but not limited to cardiopulmonary resuscitation and mechanical ventilation) they will opt out of receiving these current defaults. In patients admitted to acute care hospitals, we hypothesize that patients randomized to an intervention that explains the risks, benefits and alternatives of critical care will enhance autonomy and prevent invasive unwanted therapies of patients who opt out and that the frequency of critical care, mechanical ventilation, CPR, length of stay and hospital cost will be greater in patients randomized to routine (control group) care.

Importance

Describe why this topic is important.

A disproportionate amount of healthcare spending is provided in the last year of each patient's life, and critical care is often provided with overall poor outcomes, whether a patient has actively requested it or not. Since billions of dollars are spent on critical care in this country, there is the simultaneous opportunity to practice care that is more ethical (i.e. respects patients' autonomy), effective (i.e. provides an opportunity for physicians to explain risk, benefits and alternatives to high-risk populations who are not as likely to benefit from invasive critical care), and economic (i.e. allows patients to opt out, thereby obviating costs of default critical care that is currently the standard in the U.S.).

Potential Impact

How will an answer to your research question be used or help inform decisions for you or your group?

Multi-center study

Technical Experts and Stakeholders

Are there health care-focused, disease-focused, or patient-focused organizations or technical experts that you see as being relevant to this issue? Who do you think we should contact as we consider your nomination? This information will not influence the progress of your suggestion through the selection process, but it may be helpful to those considering your suggestion for further development.

American Thoracic Society
 J. Randall Curtis, University of Washington (Harborview) Joan Teno, Brown University

Nominator Information

Other Information About You: (optional)

Please choose a description that best describes your role or perspective: (you may select more than one category if appropriate)

Physician

Please tell us how you heard about the Effective Health Care Program

No answer provided.

May we contact you if we have questions about your nomination?

Yes