

Journal Watch

Anticipatory Grief Among Close Relatives of Patients in Hospice and Palliative Wards

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Abstract

A Swedish widowhood study revealed that four out of ten widows regarded the pre-loss period more stressful than the post-loss. The present investigation of close relatives to patients dying from cancer (using interviews and the Anticipatory Grief Scale) found that preparatory grief involves much emotional stress, as intense preoccupation with the dying, longing for his/her former personality, loneliness, tearfulness, cognitive dysfunction, irritability, anger, and social withdrawal and a need to talk. Psychological status was bad by one every fifth. However, the relatives mostly stated adjustment and ability to mobilize strength to cope with the situation. The results suggest development of support and guiding programs also for the anticipatory period.

Purpose: To study the feelings and expressions of anticipatory grief and possibly relate the finding to the relatives' need of counseling and support.

Methods: Participants were 49 men and women with a close relative being treated for terminal cancer at palliative care wards and 1 community based hospice. They were asked to complete the Anticipatory Grief Scale (AGS) and participate in a personal interview. Correlations were made between the need for support and items on the AGS.

Results: Multiple characteristics identified and rated in the interview and AGS. These results are summarized in percentages in Table 1 and 2.

Conclusions: The need for support among relatives was significantly related to various variables in the AGS. Completion of the interview and AGS highlighted the positive and the challenging experiences for the relatives. Results may indicate the relatives in most need of intervention (those still in shock or working on accepting the straining situation, or those who are not accessing support). Results suggest further research into the development and use of support and guidance programs in anticipatory grief.

Strengths:

- Interview combined with scale to give a broader picture of the person's experience,
- Captures areas of stress but also areas of strength
- The AGS has good internal consistency and can be used to identify areas of concern

Weaknesses:

- AGS was developed for use with relatives of patients diagnosed with Dementia (wording can be changed to other disease diagnosis)
- Unclear parameters or guidelines for the observation and assessment of the relations of the patient – highly subjective.
- Correlations in this study are difficult to understand

Relevance to Palliative Care

This article highlights the need for bereavement support in the period before the death of a loved one by showing the complexities of experiences relatives face, as well as the need for further development of support programs. There may be a therapeutic benefit associated with completing the AGS in and of itself, as an opportunity to explore and reflect on individual experiences, and complexities of family members before the death.