Anti-Infective Therapy at End of Life: Ethical Decision-Making In Hospice-Eligible Patients.


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Abstract:
Clear guidelines addressing the ethically appropriate use of anti-infectives in the setting of hospice care do not exist. There is lack of understanding about key treatment decisions related to infection treatment for patients who are eligible for hospice care. Ethical concerns about anti-infective use at the end of life include: (1) delaying transition to hospice, (2) prolonging a dying process, (3) prescribing regimens incongruent with a short life expectancy and goals of care, (4) increasing the reservoir of potential resistant pathogens, (5) placing unreasonable costs on a capitated hospice system. Although anti-infectives are thought to be relatively safe, they can place a burden on patients and be inconsistent to particular are plans. The current complex, and at times fragmented, medical care often fails to address these issues in decision-making. In many ways, the ethics governing the end of life decisions related to dialysis, hydration/nutrition, and hypercalcemia parallel those of anti-infectives. In this article we articulate important elements in ethical decision-making in the application of anti-infectives for patients who are eligible for hospice care, and we point to the need for prospective studies to help refine particular guidelines in these cases.

Strengths of the article: This article is one of very few that addresses the ethical implications in using antibiotic (anti-infective) therapies at the end of life. As the authors mention, limited retrospective and even fewer prospective studies are published on this topic. For ease of reading and processing the article, the authors categorize the ethical concerns into 5 well reviewed subtopics as identified above in the Abstract. The readers are encouraged to consider issues such as providing false hope, risks versus benefits, and cost effectiveness.

Applicability to Palliative Care: Choosing if and when to administer antibiotics at the end of life can be an ethical challenge for many physicians. In the absence of specific guidelines, this article provides useful information to aid in the decision making process when considering treatment with antibiotics.
NB. This article was presented in association with a recently published prospective study of the effect of antibiotics on infection-related symptoms in advanced cancer patients.