



Advance care planning 2

- Think about the treatment you hope for if you have difficulty recovering -

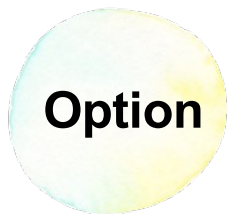


STEP 1

Think about the treatment you hope for if you have difficulty recovering

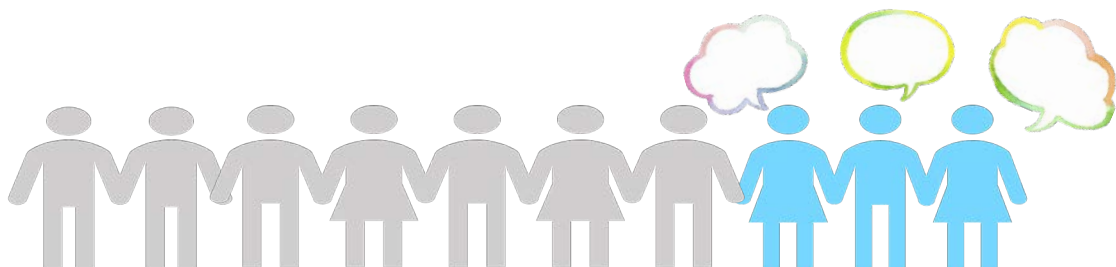
This PtDA is designed to help you plan ahead if you are in a situation where recovery is difficult during the course of treatment and you want to make sure that you are receiving the best treatment you can until the end of your life, or if you want to limit your treatment to switching treatment goals.

As you read through the PtDA, try to clear your mind based on the options that follow.

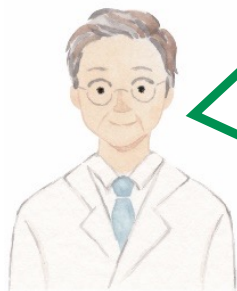


- 1 Continue to receive all treatment regardless of the survival rate.
- 2 Discontinue life-sustaining treatment when the survival rate decreases.

When you are in an ICU or when your condition worsens, change happens very quickly. The time to decide treatment is very short, and it is difficult to make a careful decision. At the end of life, when recovery is considered difficult, 70% of patients are reported to be unable to make decisions on their own.



Think about your wish for treatment



Option1

We will provide you with all kinds of treatments so that you can live as long as possible. On the other hand, you may have to be treated differently than you wish.

Option2

This means switching to treatment that focuses on relieving your pain and improving quality of life. However, this can shorten your time.

Undergo full treatment

Benefit

- You may be able to live as long as possible until your heart and breathing stop.
- Your long life will keep your family and loved ones with you for as long as possible.

Discontinue treatment that may prolong life

Benefit

- If you are unlikely to recover, you can avoid futile treatment.
- If following your wishes are no longer possible, they will be reflected and respected as much as possible.



Risk

- You cannot move freely because you are connected to a medical device. In addition, there is a high possibility that your consciousness will not recover even after treatment.
- This treatment may not be the way you wish to live.

Risk

- This treatment may shorten your lifetime.
- Your family and loved ones would spend less time with you.

STEP 2

What is a physical condition with a low survival rate?

It refers to any situation where the lifesaving rate becomes low. One case can be postoperative complications which refers to complications after surgery that can cause some of your organs to malfunction. Furthermore, a condition in which the function of two or more organs is reduced is called multi-organ failure.



Physical condition

Brain & Nerve	If you have a stroke or bleeding, your cognitive function may deteriorate and you may not regain consciousness. The hands and feet may remain paralyzed.
Circulation	If your heart and blood vessels function poorly, you may not be able to maintain your blood pressure and pulse. This leads to a decline in the function of organs such as the kidneys, liver, and intestine.
Respiratory	There are cases where water accumulates in the lungs, pneumonia, or the lungs collapse with sputum. You cannot take in oxygen by yourself, or carbon dioxide may not be emitted, or both. In such cases, an oxygen mask or a ventilator is worn.
Liver	Poor circulation or poor liver function due to various reasons can lead to jaundice and accumulation of toxins in the body, which leads to life-threatening problems.
Kidney	Your body may hold water, and waste materials in your blood may not be able to pass out of your body. Electrolyte abnormalities can be life threatening.
Blood	If the blood fails to circulate, blood tends to clot throughout the body (clot formation), and if a wound forms, it is difficult to stop the bleeding and bleeding to death is likely.
Other	If you get infected and bacteria circulates in the bloodstream, circulation cannot be maintained. This can lead to dysfunction of various organs.
Daily life	When multiple organ damage progresses and the lifesaving rate is low, daily activities become impossible. For example, you may not be able to go to the bathroom, eat, or walk by yourself.



STEP 2

ICU treatment

In order for you to survive as long as possible, you may receive the following treatment in the ICU. This treatment can be brief or prolonged until your illness or symptoms improve.

Devices needed to survive. (If it is stopped, it is immediately fatal.)

Ventilator

If you are unable to breathe or inadequately breathing on your own, the machine will help you breathe by inserting a tube into your mouth or throat. *In some cases, a mouth or nose mask can be used to provide a ventilator.

Supplementary circulation device

It is applied when your heart and lung function deteriorate and you cannot maintain circulation and breathing. A tube is inserted through the groin or neck to help circulation and breathing.



Supplementary device for living. (If you stop it, it's not immediately fatal.)

Dialysis

If kidney or liver function deteriorates, dialysis is performed at the bedside. A catheter is inserted through your groin and neck.

Sedative and analgesics

If a drain or tube is inserted, painkillers or drugs that cause sleepiness may be used.

Infusions, blood transfusion, and nutrition

You cannot drink water or eat. In that case, an infusion will be given to you. Fluid and nutrition may also be given through a tube in the nose or abdomen. You may also receive a blood transfusion.

STEP 2

What is Cardiopulmonary Resuscitation?

If the heart stops during treatment, cardiopulmonary resuscitation (CPR) is performed. This is a supplementary procedure for heart massage and artificial respiration to get the heart moving again. In general, the following occurs:

1. Chest compression

We are going to press on your chest to get your heart going again.

2. Rescue breathing

Open the airway, put a mask over your mouth and nose, and pump oxygen.

3. Electric shock


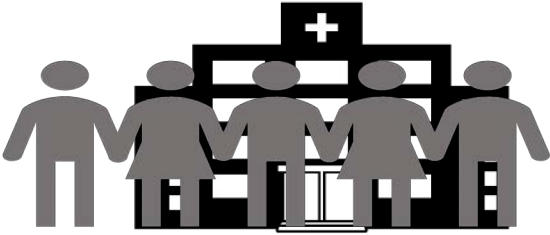


It will send electricity to the heart so that it can move normally.

4. Drug administration

Drugs to increase blood pressure are given.

*CPR usually consists of one set of chest compression and rescue breathing, not just one or the other.



	Perform CPR	Do not perform CPR
	It is reported that about one in six patients who undergo CPR during hospitalization and can be discharged in good health regardless of disease or condition.	
		
Benefit	<ul style="list-style-type: none"> If CPR is successful, you can live. 	<ul style="list-style-type: none"> It does not cause unnecessary injury to the body. It leads to natural death.
Risk	<ul style="list-style-type: none"> If CPR doesn't succeed, you won't be able to live. The chest bones of elderly people may break by cardiac compressions. 	<ul style="list-style-type: none"> Without treatment, the heart and breathing do not move naturally, so you cannot live. 

However, if the underlying disease is not treated, CPR is often not effective.

STEP 2

Discontinuation of treatment that is expected to prolong life -Focus on painless treatment

In the process of treatment, if it is judged that the survival rate is gradually decreasing and the end of life will come in a few weeks or days, the goal of treatment will be reviewed based on your wishes. Active treatment is discontinued and switched to treatment or care that focuses on relieving your pain as much as possible.

For example

Ventilator attachment and desorption repeated. Next, if breathing worsens, ventilator is not used.

Despite receiving dialysis every day, one remains unconscious. Since recovery is difficult with further continuation, dialysis is discontinued.

An assisted circulation device is installed. If the survival rate is judged to be low, the continued use of the device is discontinued.

In the ICU, patients may receive high-dose fluids and blood transfusions to maintain blood pressure. In some patients, this may cause swelling throughout the body and a significant change in the face. Skin problems may also be caused due to the insertion of a tube through the mouth for a ventilator or due to the use of many devices or tubes.



The treatment and care that you switch to are based on your medical goals and values.

Think about what living is like for you.

MEMO

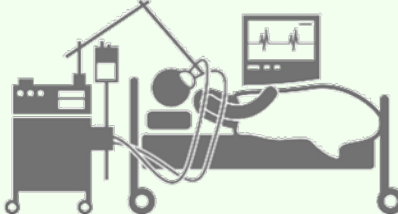

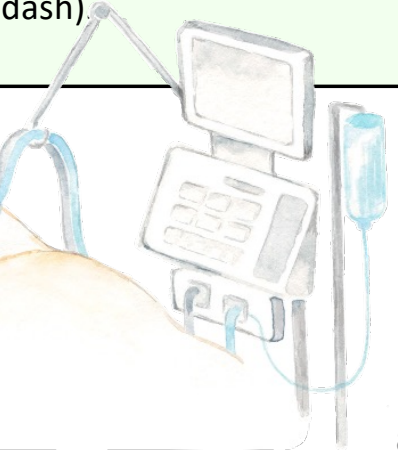
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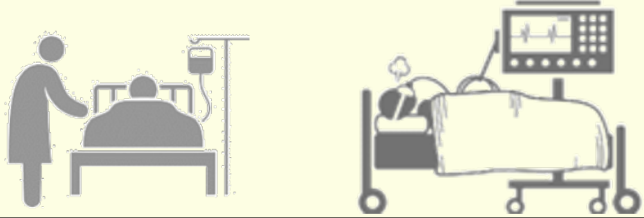


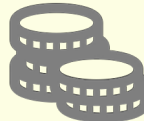
STEP
3

Understand the characteristics of the (Pros and Cons).

Let us compare treatment options when the survival rate becomes low and recovery becomes difficult during treatment.

<p>Undergo full treatment</p>	<p>Discontinue treatment that may prolong life</p>
<p>Content of treatment</p>	
<p>It is more essential to live as long as possible, even if the treatment involves a great deal of physical and mental stress.</p> 	<p>Instead of hoping that the treatment will prolong your life, it will focus on relieving pain as much as possible and treating your way of life.</p> 
<p>Whichever you choose, you can continue to treat your discomfort and distress with medication as long as you want.</p>	
<p>Survival ratio</p>	
<p>It may be possible to prolong life.</p> <ul style="list-style-type: none"> • The 1-month survival rate of patients with multiple organ damage is increasing. However, long-term survival (more than one year) is reported to be 37 ~ 74%. Please check if you intended to use the tilde symbol (wavy dash). 	<ul style="list-style-type: none"> • Depending on your condition, your heart and breathing may stop immediately or may stop after a while. • If your survival rate is low, you may avoid unwanted treatment. Please check



<p>Undergo full treatment</p>	<p>Discontinue treatment that may prolong life</p>
<p>Return to a previous life</p>	
<p>If recovered, more than 70% of patients can be discharged without disability and may be able to return to previous life.</p> 	<p>Depending on when treatment is stopped, patients may not be able to perform daily activities by themselves after discharge.</p> 
<p>Cognitive and mental function</p>	
<ul style="list-style-type: none"> • If recovery happens, 20-70% of patients may be discharged without cognitive decline.  <ul style="list-style-type: none"> • After treatment, 8 to 57% of patients may develop depression and anxiety. It has been reported that 50% of patients may have this symptom for a long time. 	<ul style="list-style-type: none"> • It depends on when you stop the treatment. There is a high possibility that you cannot think and express yourself. • The pain or discomfort may be controlled by drugs or may not be felt.
<p>Psychological impact of surrogate decision-makers</p>	
<p>Between 10-80% of surrogate decision-makers may experience increased anxiety or depressive tendencies because of your admission to the ICU.</p> 	
<p>Your recovery may reduce the anxiety and stress of the surrogate decision-maker.</p>	<p>When your death occurs, the anxiety and stress of the surrogate decision-maker may increase.</p>
<p>Cost of medical</p>	
<p>The longer you stay in the ICU or stay on life-support, the higher your medical costs.</p>	<p>The medical costs depend on the length of ICU treatment and the contents of treatment.</p> 

STEP
4

Clarify what you value and want to determine

Your wishes for treatment are as important as medical judgment. Let us examine what is important to you. Check the box that best matches your preference.



Check

Undergo full treatment

Discontinue treatment that may prolong life

1. In this judgment, how important is your lifesaving rate?

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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not matter at all

neither

very important

2. In this judgment, how important is it whether you can go back to your previous life?

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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not matter at all

neither

very important

3. What is an important issue for you?

Brain & nervous	Cardiac heart	Lung	Liver	Kidney	Extremities
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Being conscious. What you can judge, etc.	I do not want to use an assisted circulation device, etc.	I do not want to keep using a ventilator for a long time, etc.	I do not want to put on an assistive device, etc.	I do not want permanent dialysis, etc.	I do not want to be unable to walk or move by myself, etc.

Undergo full treatment

Discontinue treatment that may prolong life

4. Additional important issues or concerns for you?



<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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not matter at all

neither

very important

5. Are there any treatments that you really do not want to receive?

<input type="checkbox"/> No	<input type="checkbox"/> Yes
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Contents :

6. Is the extent of the medical expenses an important factor in this decision?

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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not matter at all

neither

very important

7. In this judgment, is it important to give priority to your opinion at all times?

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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not matter at all

neither

very important

8. Is the opinion of the surrogate decision-maker important in this decision?

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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not matter at all

neither

very important

9. Is the opinion of the healthcare provider important in this decision?

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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not matter at all

neither

very important

STEP
5

Decision



Now let us check how ready you are to decide.



Do you know the benefits and risks of each option?

Yes

No

Do you know the benefits and risks of each option?

Yes

No

Are you clear about which benefits and risks matter most to you?

Yes

No

Do you have enough support and advice to make a choice?



Yes

No



If any one of the responses to the four items above is "no," you may not be ready to decide yet. Is there anything you want to do before you decide ?

STEP
5

Decision

In the previous sections, you thought about what you would value and decide.

- Continue to receive all treatment regardless of the survival rate
- Discontinue life-sustaining treatment when the survival rate decreases.

Now let us look at how ready you are to decide.

For me, life-prolonging treatment means:

① It is the case where the lifesaving rate is considered to be about ____% according to the judgment of the healthcare practitioner.

② Others: _____.

The following treatments are continued. (Check the treatment you want to receive)

- CPR
- Mechanical ventilator
- Drugs to maintain blood pressure
- Dialysis
- Assisted circulation device (Percutaneous cardio pulmonary support)
- Infusions and nutrition
- Blood transfusion

Write down your thoughts



A series of ten horizontal dashed green lines, intended for writing thoughts.



It may be difficult to decide what treatment you want to receive if recovery becomes difficult. Once you decide, there is nothing you cannot change again.

Let us do our best to get over the surgery safely.



References

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- 5 Coulter A et al.(2013). A systematic development process for patient decision aids. *BMC Med Inform Decis Mak*, 13 Suppl 2:S2.
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