

Question:

Does allowing family to participate in the decision to interrupt life-sustaining treatment allow for a dignified death for children in the Pediatric Intensive Care Unit?

Summary:

“A good death can be defined as one that is ‘free from avoidable distress and suffering for patients, families, and caregivers, and reasonably consistent with clinical cultural and ethical standards in terminal illnesses’ (Yoshinori. 2015). There is no formula or step by step process in deciding if it is time to interrupt life-sustaining treatment. It is important for healthcare providers to communicate with the family about all options and for them to understand their role in the process. “Parents who perceive some emotional detachment or disregard from the ICU team usually show inadequately early and long-term grief” (Garros. 2003). A child in the hospital is a scary time for the parent especially for a parent of a critically ill child or a child who had traumatic injuries. Parents who are well informed and able to make an informed decision when it comes to the care of their child without suffering more than they need to. “64% of parents said they would consider withdrawing life-sustaining therapies if they child were suffering; 51% would make such a decision based on quality-of-life considerations; 43% acknowledged the influence of physician-estimated prognosis in their decision; and 7% said financial burden would affect their consideration.” (Michelson. 2009). In the article “A ‘good’ death in a pediatric ICU is it possible” they mentioned an interview that the families of these children want one physician to help guide them through the process and brochures of information about the unit. It helped them understand the treatments and care their children were receiving. This has an impact on how the family deals with the grieving process. Sometimes there is not enough time to sit down and explain in great detail but could be as simple as not beating around the bush and giving with false hope. It is hard to imagine being the one that has to tell a parent that their child will not survive this it is better for them to be fully aware of the status of their child than to be blindsided and not understand what is going on. During all my research on this topic the main constant thing I am seeing is that parents want to be informed. They want to know what is being done to their child and be able to make an educated decision on their treatment.

Conclusion:

Allowing family to participate in the decision to interrupt life-sustaining treatment does allow for a dignified death for children. Parents are able to make an educated decision on their child’s treatment and are more likely to not want to see their child suffer. They also wouldn’t want their child to have a poor quality of life. That looks different for everyone, but as long as they understand what is going on they can make the choice that is best fitting for the family. If do

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not have all the answers or full understanding of the situation, then it could cause more harm to the parents than when they do have all the information.

Work Cited:

Primary Article

Garros, D. (2003). A "good" death in a pediatric ICU: is it possible? *Jornal de Pediatria*. Retrieved March 14, 2022, from <https://www.scielo.br/j/jped/a/zmBspRPj9CP89KMqNhPCMRy/?format=pdf&lang=en>

Secondary Article

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Tertiary Article

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