

Reported wishes and values in patients with advanced chronic conditions (PACC) and patients with chronic condition (PCC). Conversations about end-of-life.

Christian Villavicencio-Chávez^{1,2}; Pilar Loncan³; Anna Torrens³; Jesús Vaquero-Cruzado^{1,4}; Mercé Ferrer³; Agnes Poblet³; Enric Gracia³; Anabel Rueda³; Nuria Roch³; María Fernández³; Jorge González³; Cristina Garzón-Rodríguez^{1,5}.

1. Caredoctors Home Care Team. Caredoctors Medicina Paliativa y Geriatria S.L. Barcelona. Spain.
2. Facultat de Medicina i Ciències de la Salut. Universitat Internacional de Catalunya. Barcelona. Spain.
3. Fundació Santa Susanna. Caldes de Montbui. Barcelona. Spain.
4. Institut Català de la Salut. Equip de Gestió de la Cronicitat, Baix Llobregat Centre. Barcelona. Spain.
5. Catalàn Institut Of Oncology. Palliative Care Unit. L'Hospitalet de Llobregat. Barcelona. Spain.

Background: Go Wish card game (GWG) is an advanced care planning tool developed to facilitate conversations about end-of-life (EOL). We have little knowledge of wishes and values in PACC and PCC

Aims: To identify the main wishes and values of PACC and PCC in a conversation about EOL using the GWG.

Methods: PACC and PCC from Fundació Santa Susanna admitted to the in-patient unit of intermediate and long term care were recruited. Their competency was registered by Drane's sliding scale (DSS). Sociodemographic data were recorded. We used the GWG as a tool to speak about EOL. Patients were asked to categorize these wishes as important or not important; which 10 wishes were the most important; and to assess the usefulness and appropriateness of the interview. A standard descriptive analysis was carried out by SPSS 21.0

Results

Average age	(n=23) 82,39 (SD=7,38)	
Sex	30,4% Men (n=7)	69,6% Women (n=16)
Patients Classification	PACC: 13 %	PCC: 87%

Drane's sliding scale of competency.

LEVEL I	8,7%
LEVEL II	52,2%
LEVEL III	39,1%

Level I. · Consent where risk/benefit balance is favourable
· Refusal where risk/benefit balance is unfavourable

Level II: · Consent or refusal where risk/benefit balance is unclear

Level III. · Acceptance where risk/benefit balance is unfavourable
· Refusal where risk/benefit balance is favourable

Top 10		Less important	
Card	%	Card	%
Not being a burden to my family	91,3	To know how my body will change	73,9
Not being connected to machines	69,6	To be mentally aware	65,2
To be free from pain	69,6	To have my financial affairs in order	65,2
To have my family with me	56,5	To die at home	65,2
To be at peace with God	56,5	To remember personal accomplishment	65,2
To maintain my dignity	56,5	To take care of unfinished business with family and friends	60,9
To trust my doctor	39,1	To meet with clergy or chaplain	60,9
To speak and be understood	39,1	To be able to talk about what death means	69,6
To be able to help others	39,1	To be able to stay at home	60,9
Not dying alone	34,8	To enjoy the food	56,5

Question assessment	%
Do you consider the interview was useful?	91,3
Do you consider the interview was appropriate?	95,7

Conclusion: Not being a burden to my family, not being connected to machines and to be free from pain were the most important wishes for the PACC and PCC. The GWG was a good tool for the conversation about EOL.