

Number of the day: 3 wishes can bring peace for families of dying patients

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In the intensive care unit of a Canadian hospital, doctors and nurses have found that eliciting three wishes from dying patients and their families can make the death process more dignified, humane and peaceful for everyone involved.

The Three Wishes Project is the brainchild of Dr. Deborah Cook, a staff physician in the intensive care unit (ICU) at St. Joseph's Healthcare Hamilton. It involves a doctor asking a dying patient, family member or other doctor caring for that patient for three wishes that would best honor their life. Cook says the idea is to humanize the dying process for the patient and ease the grieving process for the family.

"We are trying to improve the quality of the dying experience in the cold, technological, efficiency-driven intensive care unit," Cook tells Reuters.

To study how this project might help dying patients and their families, Cook recruited 40 patients, one or more family members per patient and three doctors per patient. In more than 95 percent of the patients, the decision had been made to withdraw life support. Because many of the patients were

unconscious, most of the wishes were elicited from family members and doctors. The wishes included reunions with lost relatives, special tributes (such as planting a tree in the patient's name) and organ donations. Some were as simple as requesting cherished mementos be brought into the patient's room.

In interviews conducted after the death of the patient, family members and doctors reported that nearly 98 percent of the wishes had been fulfilled, and that the process was overwhelmingly positive. "The dignity that was given to her and the compassion that was shown to her family - made it much easier to deal with," one patient's son told interviewers, according to a press release.

The CBC reports that St. Joseph's plans to continue the project, even though the study has been completed.

The research was published in the journal Annals of Internal Medicine.