

# Quality or Quantity? Respecting a Patient's Right to Choose



Lauren Leonard DO, Scarlett Austin DO, Alexandra Johnston DO  
Medicine Institute; Allegheny Health Network, Pittsburgh, PA

## Objectives

1. Patient autonomy should be honored.
2. Limited interventions, including comfort care and hospice care are acceptable treatment options that should be presented to patients.

## Introduction

- Goals of care conversations are used to illicit what treatments patients are or are not willing to undergo.
- These conversations allow physicians to present treatment plans that align with patient's wishes.

## Case Report

- Patient is a 91 year-old female with a history of hypertension and heart failure with preserved ejection fraction
- Patient lives alone and functions independently.
- Patient had recently seen primary physician for fatigue and abdominal pain.
  - Patient underwent Computed Tomography (CT) scan revealing diffuse lymphadenopathy.
  - Patient was scheduled for lymph node biopsy.
- Prior to the biopsy patient presented to the Emergency Department for worsening symptoms.
- Patient was admitted and underwent bone marrow and lymph node biopsies. This revealed peripheral T cell lymphoma.
- Patient was started on high dose steroids while family discussions were ongoing regarding treatment options.

- Treatment discussions were mainly held with the patient's two adult sons, while the patient was present in the room.
- Family was eager to get her started on chemotherapy as they were informed if she did not pursue chemotherapy, she would have three to six months to live.
- The patient and her family were informed of the risks and benefits of both treatment options, knowing that steroids would lead to less time. During the discussion, the patient expressed that she was not willing to undergo chemotherapy acknowledging that this would lead to a quicker demise.
- She stated that her main goal was to return home and enjoy her normal activities for the remainder of her life.
- This was difficult for her sons as they wanted their mom to maximize their mother's time left. After clarifying what was important to the patient, the sons were agreeable to this plan
- Palliative care was consulted, and the patient was discharged home with hospice while continuing her steroid taper.

## Discussion

- Autonomy is a patient's right to self-govern.
- Many times, physicians and families instruct patients on what to do as they believe they know what is best. However, this plan may not align with the patient's goals.
- It is crucial to clarify goals of care with patients and their families.
  - This allows physicians to make medical recommendations that are consistent with their wishes.
- Pursuing a treatment path of limited interventions, like hospice or comfort care, are acceptable treatment options that should be presented to patients.
- Hospice care and comfort care are options that allow a patient to focus on maximizing quality of life rather than quantity.

## References

Tools and Training for Clinicians: Palliative Care Programs. Retrieved August 15, 2020, from <https://www.capc.org/>  
Address Goals of Care. Retrieved August 15, 2020, from <https://vitaltalk.org/>