

Family Conflict: "They Are Just Unrealistic"

# Goals of this talk

- What are three reasons why seriously ill families/patients ask for things that you think are unreasonable
- What is a headline?
- How can you learn about an incapacitated patient's values?

# Conflict of interest

- I have the following conflicts:
  - Board of Vital Talk
  - Royalties from UptoDate and Cambridge University Press
- I will not discuss off label or investigational use in my presentation

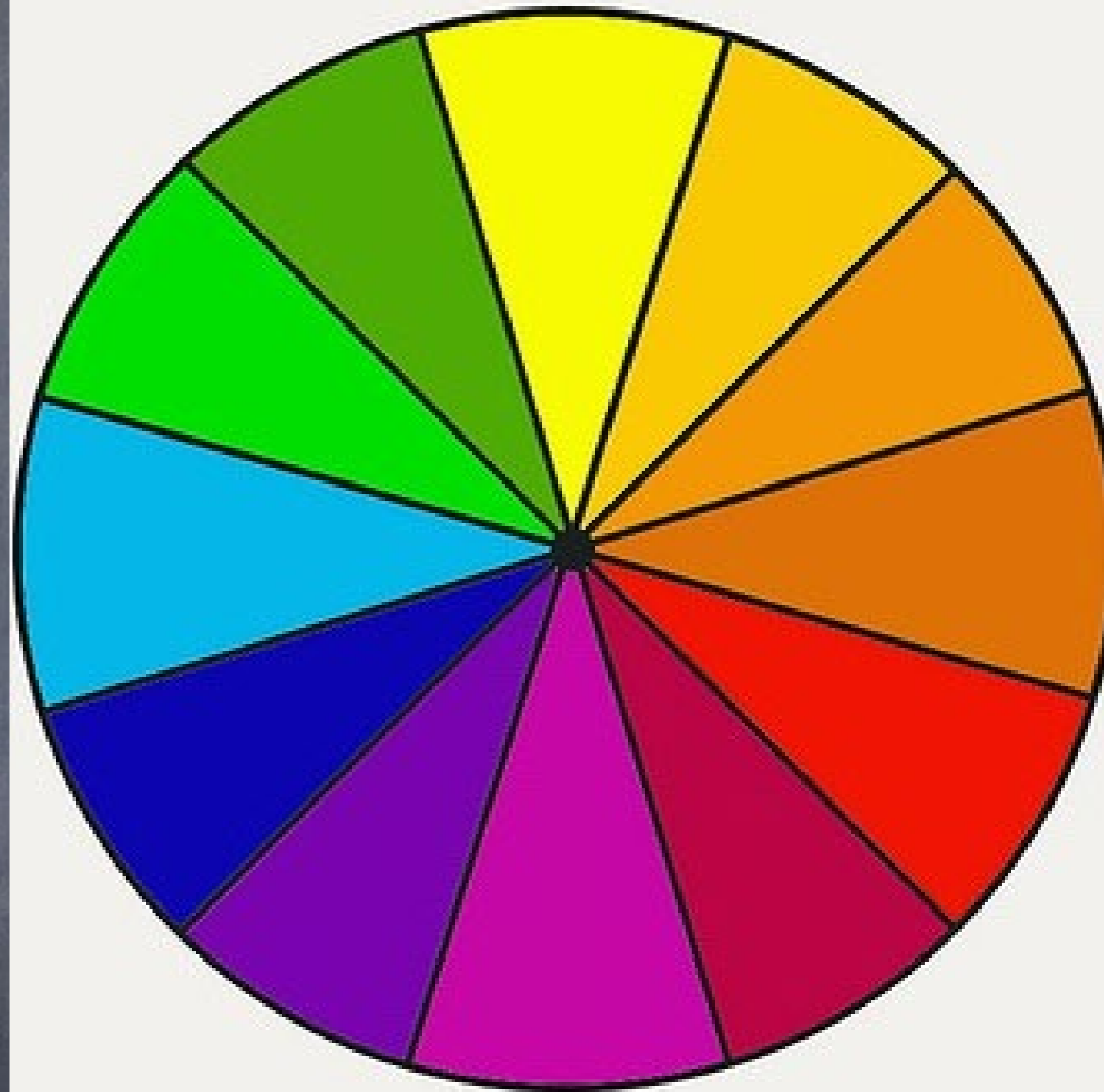


**A case**

Insanity is doing the same thing over and over again and expecting a different result

And if that doesn't work?

- Blame
- Give up and walk away
- Appeal to hospital policy

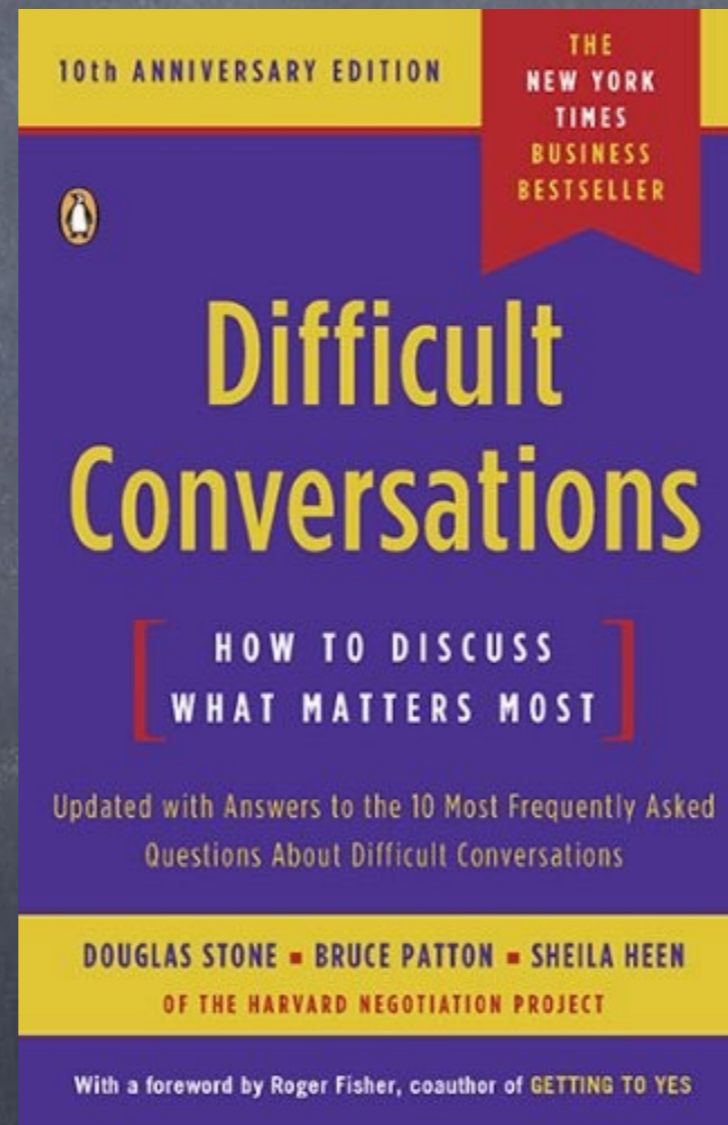


**YOU ARE THE YELLOW TO MY PURPLE**

# Turn and Talk

- Why is this caring, loving family making a decision that you think is unreasonable??

# A guide

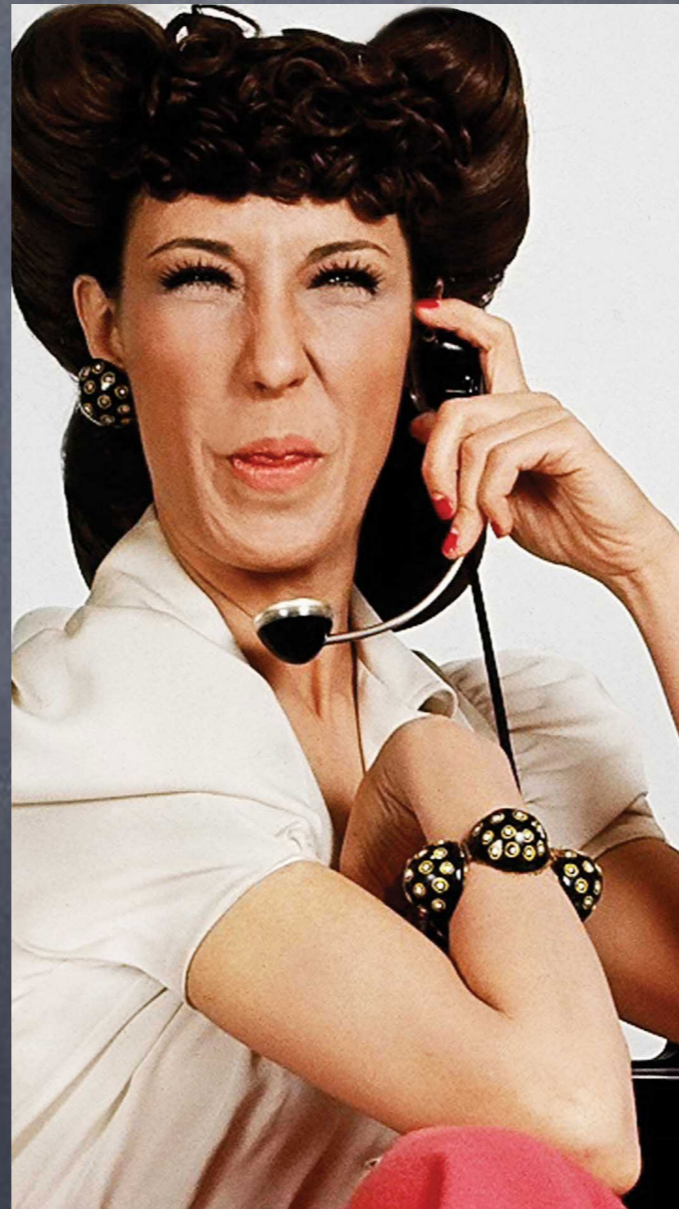


# Difficult conversation=3 conversations

- General structure (Stone et al):
  - The “what happened” conversation
  - The feelings conversation
  - The identity conversation
- In each of these three areas we make predictable errors that distort the conversation



We Talk talk talk...



# Family don't understand our story

- 102 families with a pt in an ICU for >2 day
  - interviewed 76 family members
  - Mean age 54+/-17, APACHE 40 +/-20
  - Duration of first visit 10+/-6 min
  - **54% did not know the dx (major organ involved), prognosis (grave or not grave) or tx (at least one of 10 possible treatments)**
  - **34% understood the prognosis**

# Write


Why might a family not hear  
our story?

# Why a family might not hear our story

- Clinician factors
  - Jargon
  - Hedging
  - Conflicting information from different people



**TRUST**

**I don't trust words.  
I trust actions.** 

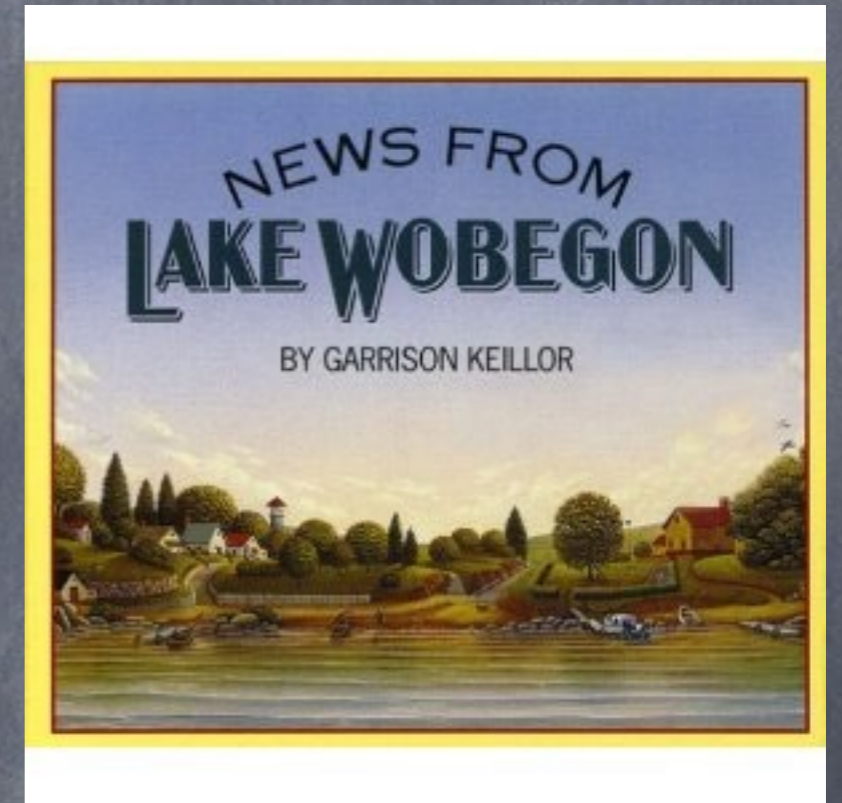
# Families ability to hear is limited

- Listening is an inefficient way to obtain information (15-25%)
- One can not process more than 3-7 pieces of information

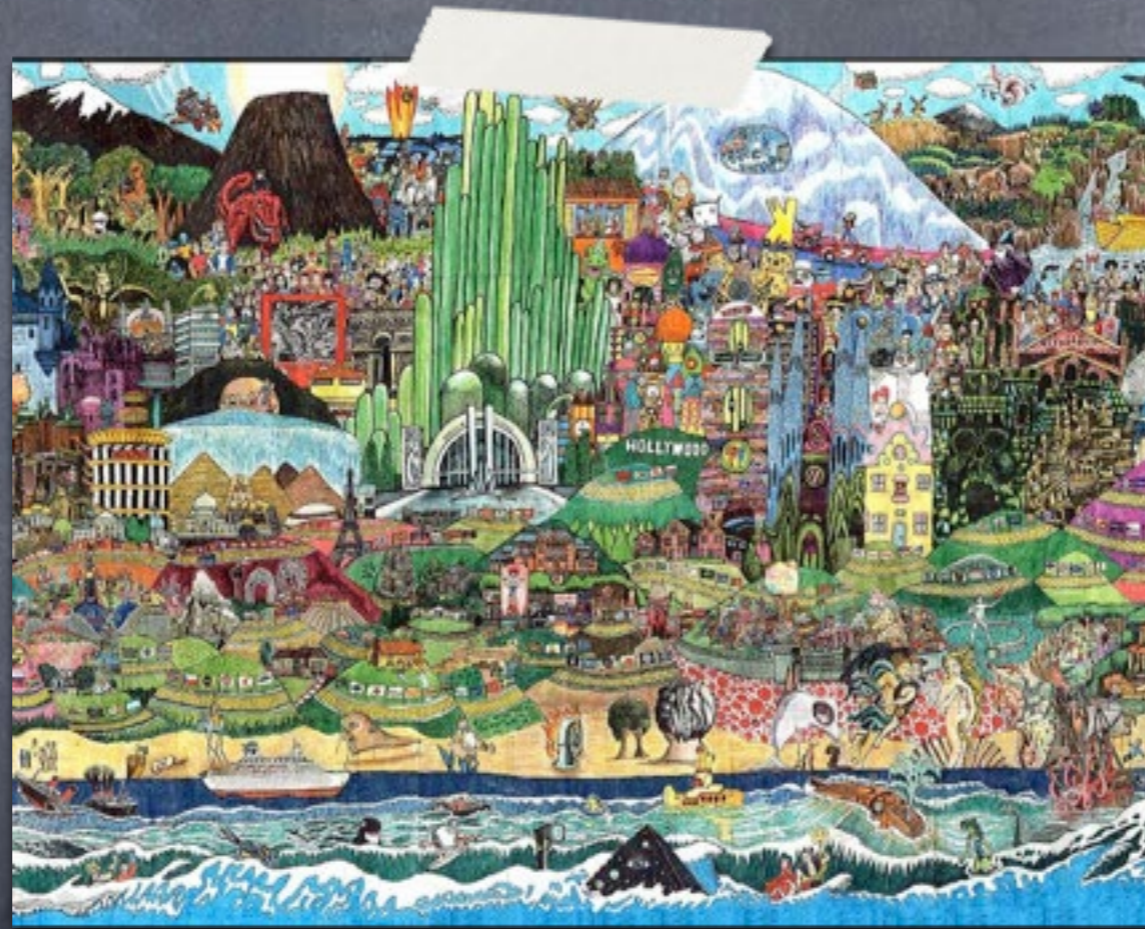


# Families filter what they hear

- Family want our info
- But filter it thru their own beliefs
- Our loved one will do better than average
- Families interpretation of statements with high risk of death are more optimistic



# Communication skills





# Attitude first

- Trust that people are doing the best they can
- Be curious
- Ask rather than talk



# Ask-tell-ask

- “Ask-tell-ask” involves:
  - Checking patient expectations
  - Sharing information
  - Inquiring explicitly about the family reaction

# Asking

- Asking permission to explore topic
- What have other clinicians told you about the illness?
- Did they talk about what the future might look like?
- What did it say when you looked at the internet?

# Telling



What is the purpose of a Headline?

# The Headline

- 1-2 sentences that give the take home message
  - Focuses on (1) the medical information and (2) what it means to the patient/family
- Understandable, 5th grade language

## Case 1

- › Mr. McGregor - 73 year old man
- › Stage IV adenocarcinoma of the lung with liver mets
- › One second line chemotherapy-→ Disease progression. Has lost 20 lb and is eating less than 25% of his food and spending more than 50% of his time in bed.
- › **WHAT IS THE HEADLINE?**

## Case 2

- › Mr. Jacobs is a 72 year-old man who presented 5 days ago with left-sided weakness found to have a large right MCA stroke. Neurology is saying that, at 6-12 months, he has a 50/50 chance of having some functional independence. You and your team think his chances are much lower given his advanced age and course of critical illness requiring mechanical life support. You are meeting with the patient's wife as patient is delirious.
- › **WHAT IS THE HEADLINE?**

# Asking again

- What questions do you have?
- Keep asking until no more questions
- What will you tell X about our conversation when you go home





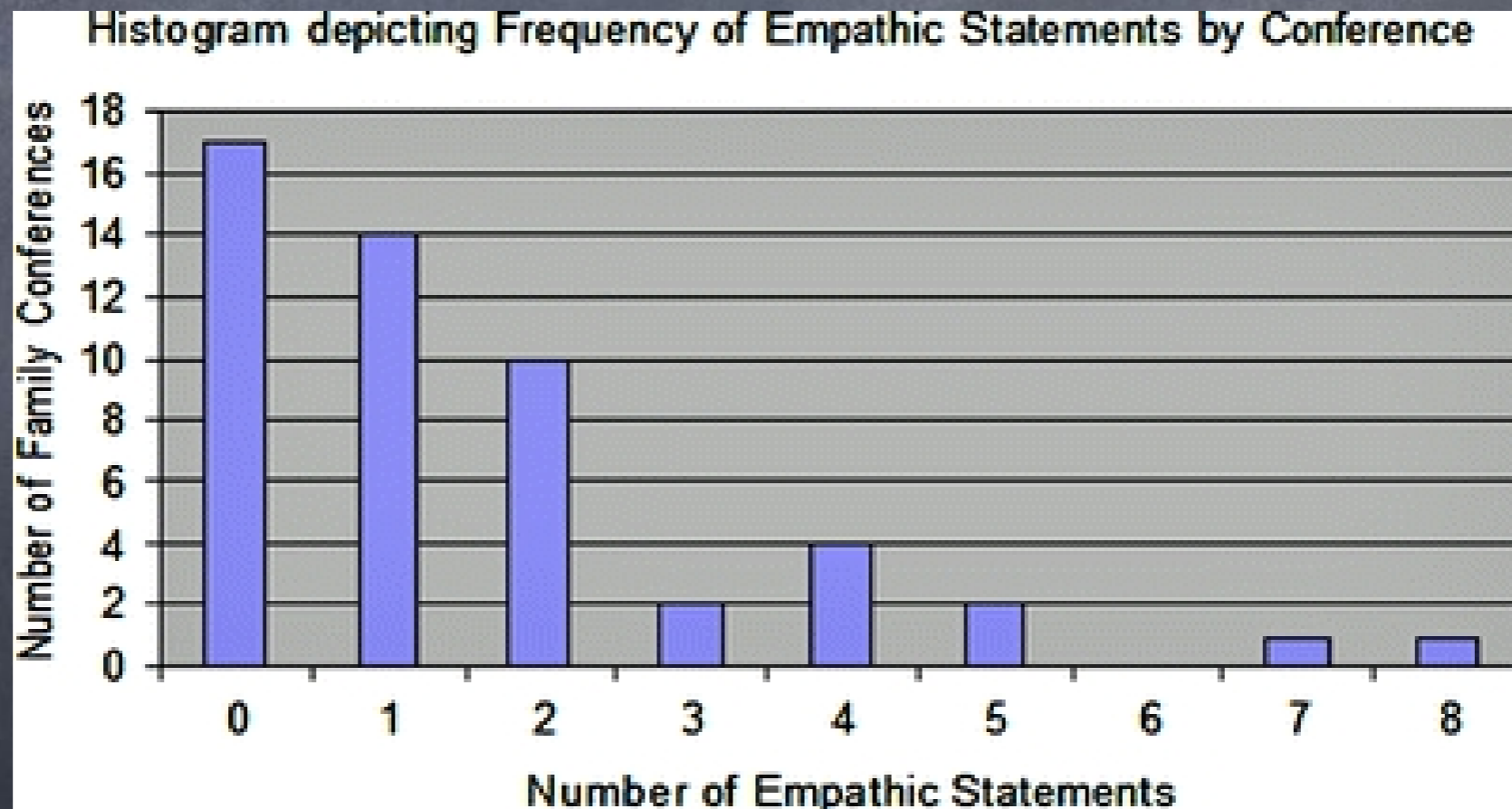
The feeling conversation

# The patient/family feelings are central

- Feelings are at the heart of difficult conversations.
  - Loss, frustration, sadness
  - Anxiety about the unknown future
  - When one is emotional they can not reason
  - Family evaluation of doctors is based on gestalt

# Physicians and emotion

- Blocking behaviors are 2x as common as empathic behaviors



# Emotions

- How can you tell emotions are present when talking to the family?

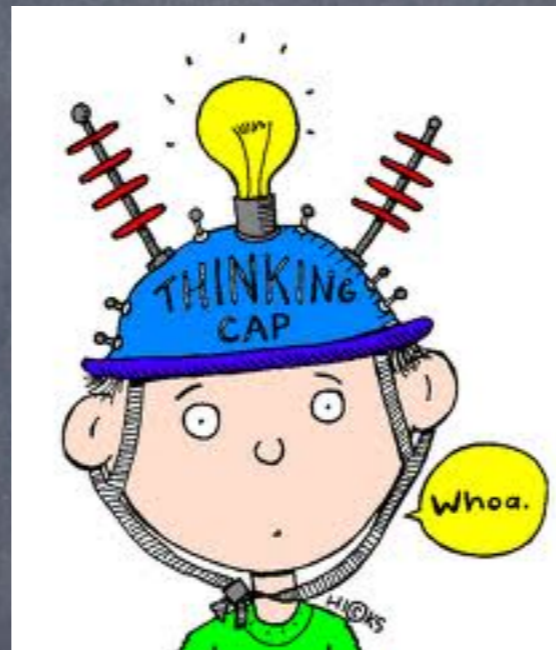
# Recognizing emotions

- Emotion words
- Paralinguistic cues
- When facts do not work
- After bad news

# Verbalize empathy

- Naming “It sounds like...”
- Understanding “I’m hearing you say...”
- Respecting “I am impressed that...”
- Supporting “I’ll be available for you...”
- Exploring “It would help me to know more about...”

# Let's practice



# What would you say?

- This can not be happening.



# What would you say?

- He walked in here and now he is so much worse.

# What would you say?

- How could this happen?

# What would you say?

- Isn't there something you can do?



Wish Statements  
~  
Expressing Unreality

# Cognitive vs emotional questions



# Denial

- Families who do “not get it”
- Our job is to help them “get it”
- Unfortunately these conversations usually go badly



# The identity conversation



# The identity conversation

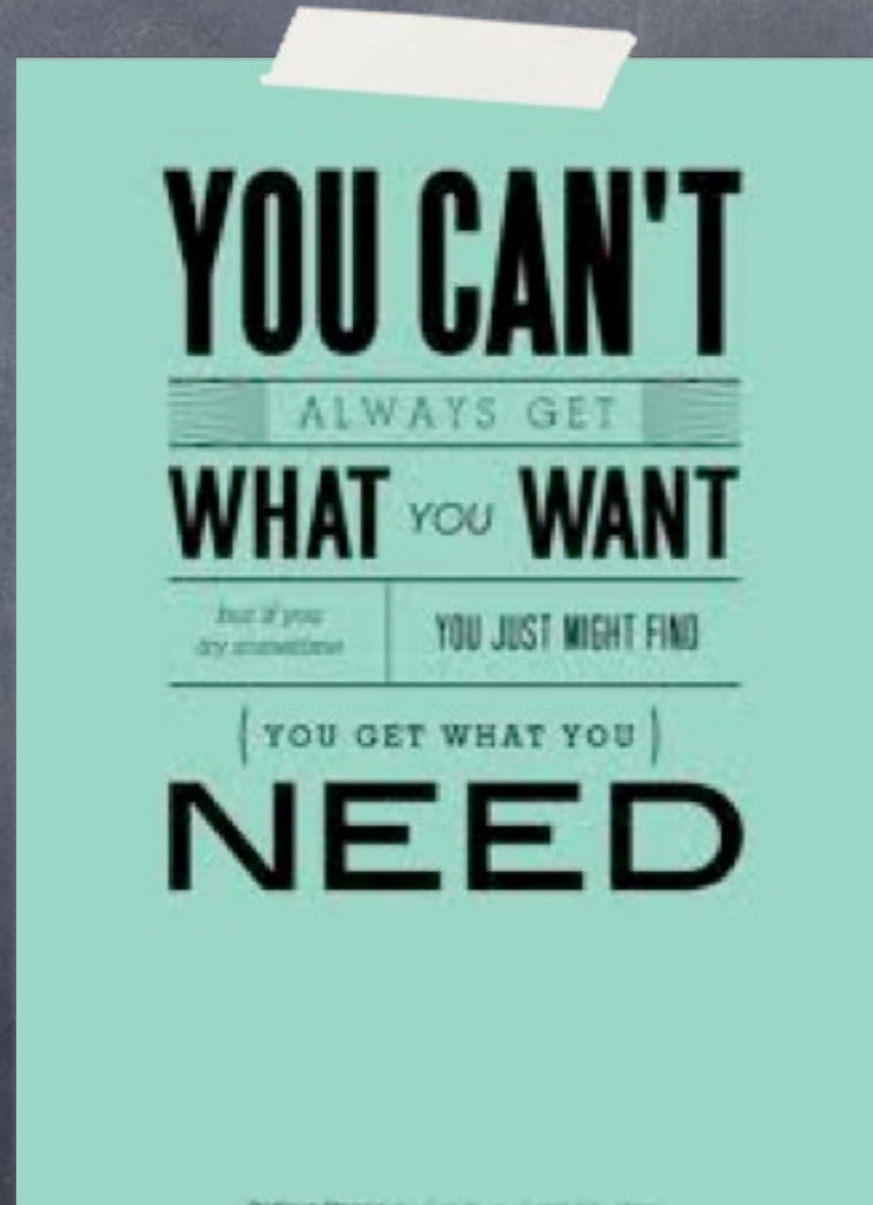
- Who are we and how do we see ourselves
  - Sets up what we think our role is
    - Keys frustration and satisfaction
    - A good intern gets the DNR order
    - Family -Son's do not give up on their dad



Step back and focus on goals



# Talking with surrogates



# Talking with surrogates



A motivational quote is centered on a background of white, fluffy clouds against a blue sky. At the top center, a bright sun is partially obscured by a small, stylized tree with orange and red foliage. The text is arranged in three lines: the first two lines are in a black, sans-serif font, and the third line is in a larger, bold, teal-colored sans-serif font.

Don't quit  
before your  
**miracle**

# Make a suggestion

- Ask if you can make a suggestion
- Show your work- patient values and goals
- Reinforce what you WILL do
- Reinforce what it doesn't make sense to do

# Example





