Conflicts regarding decisions to limit treatment: a differential diagnosis
Goold SD, Williams B, Arnold RM. JAMA 2000;283(7);909-14

Presented by: Dr Peter Lawlor
Received during: Journal Rounds, TPCU, GNH

Abstract:
Conflicts between physicians and families about end-of-life decisions create challenging and emotionally difficult situations. In this article, we propose a “differential diagnosis” of such conflicts, distinguishing and describing the characteristics of families, physicians, and organizations and society that contribute to the “etiology” of the situation, as well as strategies for “diagnosing” the dominant factors. As a medical model, the differential diagnosis can be a useful tool to help physicians understand and manage conflicts about end-of-life care.

Comments:

Strengths/uniqueness:
The authors have tried to present a very pragmatic approach that aims to identify and highlight the factors that contribute to conflict in decision-making at the end of life. There is a genuine attempt to empathize with the family perspective when such conflict arises.

Weaknesses:
In the absence of good data on this topic, this communication might sound a bit dogmatic.

Relevance to Palliative Care:
This article addresses some of the core issues that all physicians, especially those in palliative care, face in end-of-life care. These issues include resuscitation and other life-prolonging measures.