

Ethical Considerations in Advanced Dementia

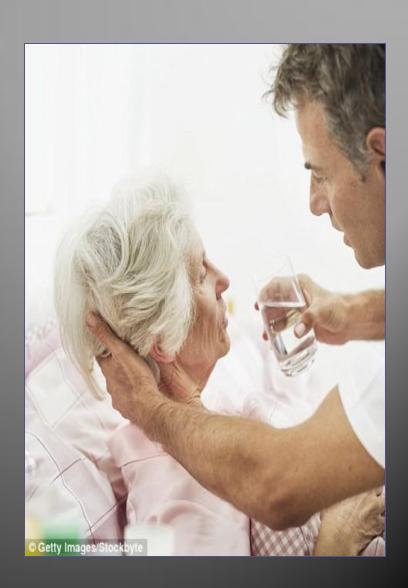
NURS 6033: Ethical Dimensions in Nursing Winde Chambers, APRN, FNP

- Mrs. Inez 84 y/o white female
- Resident of local nursing home
- Diagnosed with Alzheimer's dementia at age 79
- Admitted to the hospital with dehydration
- GI was consulted on Day 3 of admit for PEG tube placement for malnutrition



► HPI

- Historian nephew
- Dementia- progressed over past year
- Bedridden
- Decreased dietary intake over the past 2 months
- 30 pound weight loss
- Nursing home- Full assistance with meals
- Consuming less than 25%
- Past week- Sips of Ensure and water with medications
- Nephew- "Wants what is best" for his aunt



- PMH
 - Alzheimer's dementia
 - Osteoarthritis
 - Colon polyps
 - Diverticular disease
- **PSH**
 - Appendectomy

> SH

- Widow- 1 child (deceased)
- Nephew and his wife- caregivers prior to nursing home
- No living will or durable power of attorney
- ▶ FH

Noncontributory

- Medications
 - Aricept
 - Namenda
 - Megace
 - ASA
 - MVI
 - Metamucil
- Allergies
 - NKDA
- ROS
 - Difficult to obtain



PE

- VS Stable, Afebrile
- 95 pounds
- Lethargic Opens eyes
- Mumbles oriented to person, recognizes nephew
- Lungs- Clear
- Abdomen- scaphoid
- Bowel sounds- present
 Stage 2 decubitus ulcer to coccyx



- Lab/Diagnostic test
 - Admit
 - Na 150; BUN 55; Creat 1.9
 - Hgb 13; HCT 39
 - Day 3
 - Na 145; BUN 22; Creat 1.1
 - Hgb 9.8; HCT 29
 - Prealbulin 10 mg/dl
 - Video esophagram- delayed swallowing reflex, no aspiration

Case Study

- Assessment
 - Oral phase dysphagia
 - Malnutrition
 - Alzheimer's dementia

- Plan
 - PEG or not to PEG?



American Gastroenterological Association (AGA)

- Position statement
 - PEG tubes should be considered for patients that:
 - cannot or will not eat
 - have a functional gut
 - for whom a safe method of access is possible

(AGA, 1994)



Ethical considerations

Treatment Options

- PEG
- Not to PEG



Moral Principles

- Beneficence
- Non-maleficence
- Autonomy
- Justice

Ethical considerations

Code of Ethics for Nurses With Interpretive Statements



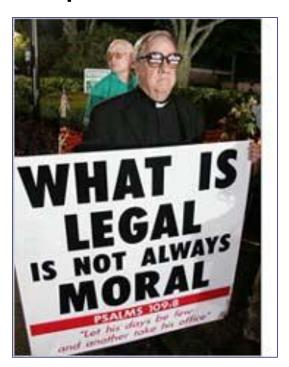
Code of Ethics for Nurses

"The acceptability and importance of carefully considered decisions regarding resuscitation status, withholding and withdrawing life sustaining therapies, forgoing medically provided nutrition and hydration, aggressive pain and symptom management and advanced directives are increasingly evident."

(American Nurses Association, 2001)

Legal considerations

- Advance Directives
- Withholding vs. Withdrawing
- Medicare/Medicaid laws for nursing homes
- Reimbursement higher for PEG patients



Legal considerations/cases

Terri Schiavo

Nancy Cruzan









" SECOND OPINION, ANYONE?"

DNP/APRN Role

- Recognize personal values and beliefs
- Advance Directives
- Determine If Patient Is A Candidate For PEG Tube
- Moral Principles
- Code Of Ethics For Nurses
- Assess Cultural And Religious Beliefs
- Obligation Of Veracity
 - Meet with family- Discuss Benefits And Burden Of PEG tube

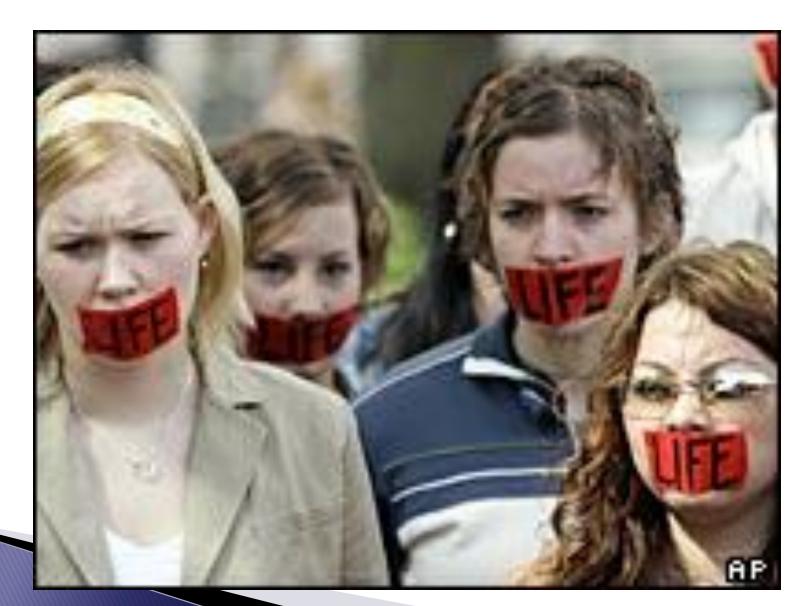
- Mrs. Inez's Nephew-"wants what is best" for his aunt
- No Advanced directives
- Discuss benefits and burdens of PEG tube
- Following Day- Nephew elected to forego PEG placement as he believed she "would not have wanted a feeding tube"
- Continued hand feeding with pureed foods and nutritional supplements



Summary

- Did Mrs. Inez's nephew make the right decision?
- Quality of Life
 - Improved
 - Maintained
 - Diminished
- SUPPORT

Right to Life?



Right to Death?



References

- American Gastroenterolgical Association. (1994). American Gastroenterological Association Medical Position Statement: Guidelines for the Use of Enteral Nutrition. Retrieved from: http://www3.us.elsevierhealth.com/gastro/policy/v108n4p1280.html
- ▶ Barratt, J. (2000). A patient with alzheimer's disease, fed via percutaneous endoscopic gastrostomy, with personal reflections on some of the ethical issues arising from this case. *Journal of Human Nutrition Dietet*, 13, 51–54.
- Beauchamp, T.L., & Childress, J.F. (2009). Principles of biomedical ethics (6th ed.). New York: Oxford University Press.
- Byrd, L. (2004). The use of artificial hydration and nutrition in elders with advanced dementia. *Topics in Advanced Practice Nursing eJournal*. Retrieved from
 http://www.mods.cape.com/viowarticle/472047
 - http://www.medscape.com/viewarticle/472947
- Cervo, F., Bryan, L. & Farber, S. (2006). To PEG or not to PEG: a review of evidence for placing feeding tubes in advanced dementia and the decision making process. *Geriatrics*, 61(6), 30-35
 - DeLegge, M. (2009). Tube feeding in patients with dementia: where are we? Nutrition in Clinical Practice, 24(2), 214-216.

References

- Dennehy, C. (2006). Analysis of patients' rights: dementia and PEG insertion. British Journal of Nursing, 15(1), 18-20.
- Gillick, M. & Volandes, A. (2008). The standard of caring: why do we still use feeding tubes in patients with advanced dementia? *Journal* of American Medical Directors Association, 9, 364-267.
- Kuo, S., Rhodes, R., Mitchell, S., Mor, V. & Teno, J. (2009). Natural history of feeding-tube use in nursing home residents with advanced dementia. *Journal of American Medical Directors Association, 10*, 264-270.
- Lo, B. (2009). Resolving ethical dilemmas: A guide for clinicians (4th ed.). Philadelphia: Lippincott Williams & Wilkins.
- Sampson, E., Candy, B., & Jones, L. (2009). Enteral tube feeding for older people with advanced dementia. Cochrane Database of Systemic Reviews. Advanced online publication.
 - doi: 10.1002/14651858.CD007209.pub2.
- Thompsell, A. & Guldberg, C. (2005). PEG feeding: a difficult decision that must be shared. *Journal of Dementia Care*, March/April 28-29.