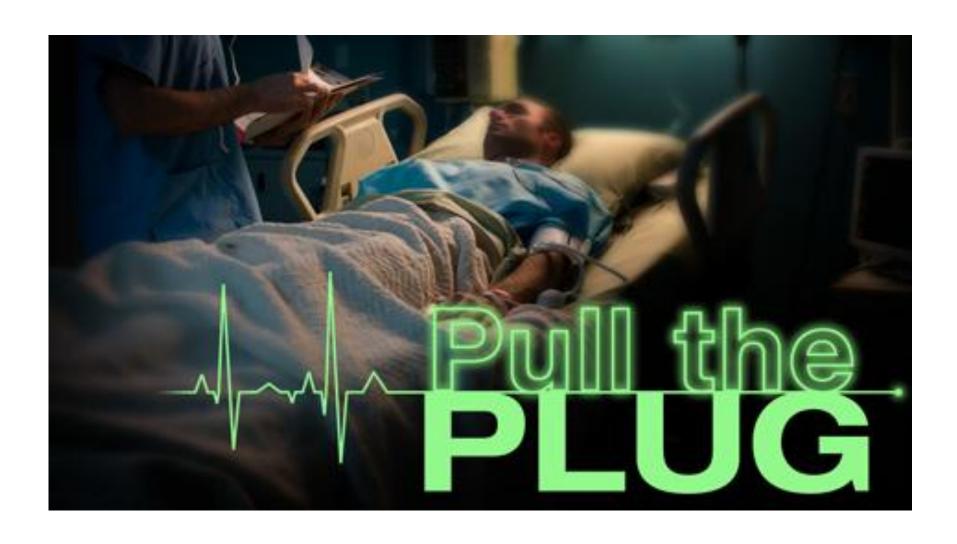
# How to Engage the Media and the World on End-of-Life Care

Lisa Priest, former journalist

## Objectives

- How to engage the media on end of life stories that speak to the larger system/societal issues
- How to recognize a story that is compelling to media outlets
- Tips on how to be proactive and recognize landmines

# W5



# "Lessons of a \$618,616 Death" Bloomberg News

"We're all caught in a machine...It's not an evil machine but it's one that moves forward."

Amanda Bennett, Pulitzerprize winning journalist whose husband died from a rare kidney cancer in 2007

## Hospice Care, Globe and Mail



## Headlines

- Family goes to court to keep dad alive: 'He talks to us with his eyes'
- Work Needed to Improve End of Life care Globe and Mail, April 2013
  - 45 per cent cancer patients still die in acute-care hospital beds, CIHI data
  - Rates vary substantially between provinces, ranging from 69 per cent of Manitoba cancer patients dying in hospital to 39 per cent in British Columbia.

### **Word Choices**

#### **Study: Doctors' Word Choice Affects End-of-Life Decisions**

People were 20 percent more likely to choose DNR if it was phrased as "allowing natural death;" 25 percent if they were told it's what most other people choose.

LINDSAY ABRAMS | MAY 10 2013, 8:03 AM ET



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PROBLEM: "I think that's the most urgent issue facing America today, is people getting medical interventions that, if they were more informed, they would not want," said Dr. Angelo Volandes in the May issue of The Atlantic. "It happens all the time." Doctors struggle with how to explain end-of-life care to patients and to the people who are asked to make these decisions for them, and next-of-kin sturggle with the fear of not doing what's best for their loved one. Especially if what's best may be to do nothing.

### Study - Critical Care Medicine

When asked to choose between CPR and a Do Not Resuscitate (DNR) order

60 percent of participants went for CPR

When the doctor used the phrase "allow natural death" instead

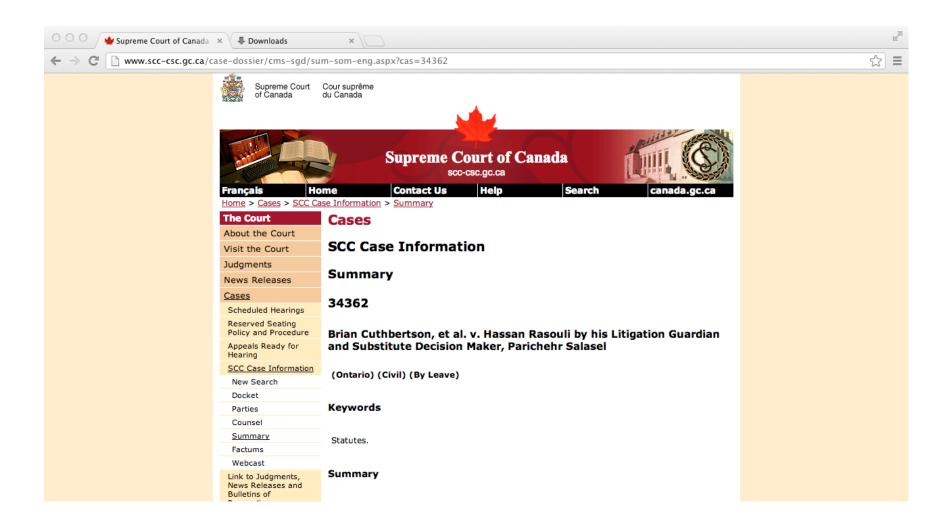
only 49 percent of patients chose resuscitation.

When the doctor said, "In my experience, most people do not want CPR,"

- 48 percent decided to go against the norm and choose CPR anyway (versus 64 percent when they were told CPR was the more popular decision).

allowing something to happen, instead of interfering with a chance at survival

## Supreme Court of Canada



## Supreme Court of Canada case

The respondent is in a coma. The appellants, who are his physicians, seek to withdraw life sustaining treatment and to administer palliative care. The respondent's substitute decision maker under the Health Care Consent Act, 1996, S.O. 1996, c. 2, refuses to consent to withdrawing life sustaining treatment. The appellants acknowledge that they require consent to administer palliative care but they believe that they do not need consent to withdraw life sustaining measures that are no longer medically indicated. At issue is whether the appellants require consent or a determination from the Consent and Capacity Board that withdrawing life support is in the respondent's best interests.

## End of Life stories

1. Hospice care

1. End of life court cases

1. Costs of dying

## **Engaging the Media**

 Be proactive: think about the stories about to hit the news

 Provide special access to reporters if you want to tell a unique story

Cultivate relationships with reporters who specialize in the area

# Questions