09 **PERSPECTIVES OF COMMUNITY DWELLING
OCTOGENARIANS ABOUT THE USE OF LIFE-SUSTAINING
TECHNOLOGIES FOR THEIR FUTURE CARE**

J. Kryworuchko¹, P. Strachan², R.D. Heyland³, D.K. Heyland^{3,4} ¹*University of Saskatchewan, Canada;* ²*McMaster University, Canada;* ³*Kingston General Hospital, Canada;* ⁴*Queen's University, Canada*

10.1136/bmjspcare-2012-000250.108

To better inform advance care planning initiatives, we conducted a qualitative study of community dwelling people aged 80 or more to enrich our understanding of their perspectives about the use of life-sustaining technologies in relation to their future care. In a semi-structured interview, 14 participants were asked what kind of health care they would want if they became seriously ill, so ill that they might die. We specifically probed their preferences for life-sustaining technologies and circumstances in which they had shared these preferences. Transcripts and field notes were analysed to categorise data in themes and subthemes. Participants represented octogenarians with variable levels of decision preparedness and included people who preferred a range of involvement in decision-making from passive to active consumers. Three overarching themes included: (1) their faith in others to do the right thing, (2) their focus on managing certainties, and (3) the role that perception of prolonging agony or alleviating suffering played in their preference for life-sustaining technologies. Few participants had considered that decisions would need to be made about life-sustaining technologies during the dying process and therefore had never considered the need to discuss their preferences to facilitate decisions in future. A key barrier to engaging some octogenarians may be their perception that there was no decision to be made since “they’ll take care of me”. Insights gained from this study highlight the sort of “active engagement” strategies needed to improve advance care planning and end of life decision making.