113 INVESTIGATION ON THE USE OF ADVANCE DIRECTIVES FOR PATIENTS ATTENDING A HOSPITAL IN JAPAN

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Background In Japan, living wills and advance directives (AD) are not commonly used, and there is no system or law to support the decision making of patients. Furthermore, there is no available law about the withdrawal of life-sustaining treatments or appointment of a medical attorney. Thus, medical staff must deal with ethical dilemmas related to medical decision making in end-stage disease.

Aim To investigate the use of AD for patients attending a hospital of the National Centre for Geriatrics and Gerontology for treatment from May, 2008.

Methods We examined the contents described in ADs and assessed the trend of the wishes.

Results To date 127 people (67 female, average age 74.6) have participated. Many have respiratory diseases (26 people) and malignant disorders (21 people). Most people wished to nominate an attorney but only one had a medical attorney, 111 people did not wish for resuscitation. More than 90% did not wish for life-sustaining treatment (respirator, or tube feeding), whereas the wish for intravenous feeding was relatively high (32.3%). As for the place of death, 62 people wished to die in hospital and the least preferred place was at home (11 people).

Conclusion We found that many Japanese, during their end-of-life care, want to die in hospital while receiving some kind of treatment such as intravenous feeding. The construction of the system to support the decision making of the patients is an urgent problem in Japan.