

**Supplementary A.**  
**Sociodemographic and clinical characteristics of the 201 participants**

Characteristic (evaluation tool) (1)	mean (range)	n	%
Total		201	100
Age years	67 (23-94)		
Gender, female		92	46
Educational			
Without studies		3	1
Primary school /High School		109	55
Vocational training /University		98	44
Marital status			
Single, widower, separated, divorced		71	35
Married, partner		120	60
Other		10	5
Religious beliefs			
Not believer		29	14
Believer		172	86
Advanced disease (2)			
Oncologic		198	98
Others		3	2
Information about disease (3)			
Diagnostic but not prognostic		102	51
Diagnostic and prognostic		99	49
Treatment received (last 3 months)			
None		48	24
Curative treatment (4)		153	76
Previous depression history		23	11
Previous anxiety history		15	7
Receiving specialized palliative care (5)		142	71
Symptom burden (ESAS-r)	27 (0-68)		
Self-perceived dignity (PDI)	40 (25-94)		
Karnofsky Performance Status			
30-40		23	11
50-70		151	76
>70		27	13
Depressive and anxious symptoms (HADS)			
Moderate		31	15
Severe		32	16
Anxiety (HADS-A)			
Moderate		19	9
Severe		25	12
Depression (HADS-D)			
Moderate		24	12
Severe		52	26
Demoralization (DS-II, n=165)			
Moderate		32	19
Severe		5	3
Wish to die			
Sometimes		22	11
Every day or almost every day		14	7
Hasten death (in the sub-sample of 36 patients with wish to die)			
Have thought about it but never would do it		5	14
There is a plan		3	8

- (1) ESAS-r: Edmonton Symptom Assessment System, revised version; DS-II (es): Demoralisation Scale Spanish version; HADS: Hospital Anxiety and Depression Scale; PDI: Patient Dignity Inventory, Spanish version
- (2) Advanced disease is referred to a progressive and irreversible disease. In addition to cancer patients, patients with Amyotrophic Lateral Sclerosis (n=2) and a patient (n=1) with advanced heart failure were interviewed.
- (3) Level of information that patients were given referring the diagnosis and the prognostic of the disease
- (4) Curative treatment refers to those active treatments administered in order to stop or slow the progress of the disease.
- (5) Patients receiving specialized palliative care due to their complex needs

## Supplementary B. “Assessing Frequency and Extent of Desire to Die” (AFEDD) guideline

This is not a clinical instrument; it is a guide for a clinical interview; the questions should be adapted to each patient, their context/culture/vocabulary.

### PRESENCE

# **Interviewer:** “Some people in your situation may involuntarily start to think that living like this is not worth it anymore.

Lately (in the last week or two) have you thought that living like this is not worth it?

*[Asking this way normalises the situation, prevents blaming the patient and makes it easier for them to open up]*

#### **Patient:**

- No (thank you and nothing more)
- Yes (continue with the following questions)

### FREQUENCY

# **Interviewer:** “Is this a thought/feeling, you have had...?”:

*[Thought/feeling; use the words the patients used]*

#### **Explore:**

- Every day
- Not every day but almost every day
- Occasionally/sometimes
- Seldom/almost never

### EXTEND

# **Interviewer:** “With regards to this thought/feeling?”:

#### **Explore:**

- Have they only thought about it?
- Have they talked about/mentioned it to someone *[doesn't matter who; find out who]*
- Have they ever thought about how you would put an end to your life? :
- Yes, but they wouldn't ever do it *[various reasons (explore) –usually spontaneous]*
- Yes *[There is a plan – they may or may not be able to explain it]*

Supplementary table C.  
**Univariate logistic regression between WTD and sociodemographic, clinical factors and systematic evaluation in 201 patients with advanced illness**

Variable	Response/Evaluation tool [Score] (1)	Multivariate logistic regression			p-value (2)
		OR	95% CI	Standard error	
Age		1.03	0.99-1.06	0.01	0.058
Gender	Female	1.00	0.30-1.28	0.22	0.196
	Male	0.62			
Having religious beliefs	Not believer	1.00	0.37-2.98	0.55	0.919
	Believer	1.05			
Treatment received (last 3 months)	None	1.00	0.14-0.66	0.12	0.03*
	Yes	0.31			
Depression history	No	1.00	1.42-9.13	1.71	0.007**
	Yes	3.59			
Anxiety history	No	1.00	1.15-10.4	1.95	0.027*
	Yes	3.46			
Needing specialized palliative care	No	1.00	1.09-7.07	1.32	0.031*
	Yes	2.78			
Karnofsky Performance Status	KRN [0-100]	0.96	0.93-0.99	0.01	0.036*
Advanced disease	Oncologic	1.00	0.85-109.4	11.95	0.067
	Others (3)	9.64			
Information about disease	Diagnostic but not prognostic	1.00	1.20-10.8	1.20	0.000**
	Diagnostic and prognostic	4.63			
Symptom burden	ESAS-r [0-100]	1.17	1.01-1.36	0.09	0.035*
Depressive and anxious symptoms	HADS [0-42]	1.11	1.06-1.16	0.02	0.000**
Meaning in life	DS-II [0-16]	1.51	1.30-1.76	0.11	0.000**
Coping abilities	DS-II [0-16]	1.22	1.07-1.40	0.08	0.003*
Demoralization	DS-II [0-32]	1.22	1.13-1.33	0.05	0.000**
Self-perceived dignity	PDI [25-125]	1.04	1.01-1.07	0.01	0.001*

(1) Treatment received (last 3 months): The patient has been taking curative or life prolonging treatments in that period (i.e. chemotherapy, radiotherapy); Needing specialized palliative care: Those patients due to their advanced complex disease requiring specialized palliative care; KRN: Karnofsky Performance Status Scale; Information about disease: Level of information that that the doctor in charge of the patients gave referring the diagnosis and the prognostic of the disease; ESAS-r: Edmonton Symptom Assessment System, revised version; DS-II (es): Demoralisation Scale Spanish version; HADS: Hospital Anxiety and Depression Scale; PDI: Patient Dignity Inventory, Spanish version.

(2) Model p-value= 0.0001; (\*) statistical significance is  $p < 0,05$

(3) Others: Amyotrophic Lateral Sclerosis (n=2) and patient with advanced heart failure (n=1)

Supplementary table D.  
**Univariate logistic regression between HDI and sociodemographic and clinical factors in 36 patients with wish to die**

Variable	Response/Evaluation tool [Score] (1)	Multivariate logistic regression			p-value (2)
		OR	95% CI	Standard error	
Age	n, range	0.97	0.91-1.03	0.03	0.349
Gender	Female	1.00	0.14-3.47	0.57	0.655
	Male	0.69			
Having religious beliefs	Not believer	1.00	0.17-0.97	0.13	0.047*
	Believer	0.13			
Treatment received (last 3 months)	None	1.00	0.029-7.2	1.18	0.655
	Yes	1.44			
Depression history	No	1.00	0.40-11.9	1.90	0.361
	Yes	2.2			
Anxiety history	No	1.00	0.07-6.6	0.77	0.721
	Yes	0.66			
Needing specialized palliative care	No	1.00	0.15-15.3	1.79	0.721
	Yes	1.52			
Karnofsky Performance Status	Score 0-100	1.02	0.97-1.08	0.03	0.417
Advanced disease	Oncologic	No data available			
	Others (3)				
Information about disease	Diagnostic but not prognostic	No data available			
	Diagnostic and prognostic				
Symptom burden	ESAS-r [0-100]	1.11	1.02-1.21	0.05	0.013*
Depressive and anxious symptoms	HADS [0-42]	1.12	1.01-1.24	0.06	0.031*
Meaning in life	DS-II [0-16]	1.26	1.01-1.56	0.14	0.039*
Coping abilities	DS-II [0-16]	1.47	1.05-2.05	0.25	0.023*
Demoralization	DS-II [0-32]	1.19	1.03-1.38	0.08	0.016*
Self-perceived dignity	PDI [25-125]	1.05	0.99-1.11	0.03	0.111

(1) Treatment received (last 3 months): The patient has been taking curative or life prolonging treatments in that period (i.e. chemotherapy, radiotherapy); Needing specialized palliative care: Those patients due to their advanced complex disease requiring specialized palliative care; KRN: Karnofsky Performance Status Scale; Information about disease: Level of information that that the doctor in charge of the patients gave referring the diagnosis and the prognostic of the disease; ESAS-r: Edmonton Symptom Assessment System, revised version; DS-II (es): Demoralisation Scale Spanish version; HADS: Hospital Anxiety and Depression Scale; PDI: Patient Dignity Inventory, Spanish version.

(2) Model p-value= 0.0001; (\*) statistical significance is  $p < 0,05$

(3) Others: Amyotrophic Lateral Sclerosis (n=2) and patient with advanced heart failure (n=1)