Is it Worth it?:
Utilizing 8 Pearls for Successful Decision-Making in Long-Term Care

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• None
Objectives

• Describe the 8 Pearls for decision-making framework for LTC residents
• Apply the 8 Pearls for decision-making framework for LTC residents
• Discuss the benefits and burdens of utilizing such a framework
Reflection Exercise

• Please take a minute the think about a recent challenging medical decision-making situation with one of your long-term care residents?
• How did you come to a decision on how best to proceed?
• Please discuss with your neighbor.
Background

• Two extremes in the care of older adults
  – Treating all older adults as if they are actively dying and denying effective, tolerable, and desired care
  – Treating all older adults as if they are 45 with excessive aggressiveness and unrealistic expectations

• Give patients the medical care that is
  – Wanted
  – Tolerable
  – Purposeful
  – Effective
  – Systematic
Combining goals and efficacy

Patient goals
- Longevity, Comfort and Quality of Life
- Risk tolerance
- Pain tolerance
- Frailty and life expectancy

Medical interventions
- Efficacy
- Efficacy over time
- Likelihood of benefit
- Harms
- Polypharmacy
“Is It Worth It?”

- Is it even effective in an older adult?
- Is it effective for a clinical endpoint that the patient cares about? (goals of care)
- What is the time frame for efficacy (over long haul/short term)
  - Will the patient outlive the usefulness of the intervention?
  - Will they achieve it within their life expectancy?
- What is the likelihood of achieving benefit (i.e. NNT)? Is that worth it to the person?
“Is It Worth It?”

- Is it worth the risk of side effects?
  - Is it worth having the side effect?
  - Is it worth the risk of failure?
- Will it achieve their QOL goal?
- Is it a priority among all the person’s medical problems?
- Is there a religious, cultural or personal belief or fear that may be very important?
Topic #1

• 88 year-old nursing home resident with significant PMH of HTN, moderate Dementia, CHF, HL, DM2 for the past 20 years who is in her usual state of health.

• She currently takes a diuretic, beta-blocker and ARB.

• Her BP runs 140-150s/70s.
Topic #1

• The patient has life prolonging goals in her current state
• She has a good quality life now
• She is tolerating her current treatment
• She has a life expectancy of around 3 years
• Is it worth treating her HTN?
HTN: Is It Worth It?

Is treating hypertension effective in the elderly?

• Yes.

• At every age studied, every age has responded to hypertension treatment including the very old.

• References:
HTN: Is it worth it?

Is it effective for a clinical endpoint the patient cares about?

• Effective for
  – Decreasing strokes and heart failure exacerbations.

• Not effective for
  – Preventing myocardial infarctions

• Possibly effective for
  – Mortality
HTN: Is It Worth It?

What is the time frame for efficacy?

• Definitely as short as 1.8 years (20 months)
• Possibly shorter
HTN: Is It Worth It?

What is the likelihood of achieving benefit? (efficacy increases over time)

- NNT is 41 over 2 years to prevent a death
- NNT is 53 over 2 years to prevent a CHF event
- Treating a 1000 patients over 2 years would prevent 24 deaths, 10 strokes, 19 heart failure events and 33 CV events
HTN: Is It Worth It?
HTN:

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Topic #2

• Individually - use the patient or scenario you were discussing early and complete the worksheet. Some ideas:
  – CHF
  – DM
  – Osteoporosis
  – Hyperlipidemia
• Group – who would like to share?
What are the burdens of using such a conceptual framework?
What are the **benefits** of using such a conceptual framework?
Take Home Message

• Helpful to have a methodological framework on how to approach certain diagnosis in older adults residing in long-term care communities