Muerte en casa vs muerte en el hospital

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Dr. Juan Miguel García Lara
Instituto Nacional de Ciencias Médicas y Nutrición
Salvador Zubirán
Ciudad de México. México

Muerte en casa vs muerte en el hospital

- Introducción
  - Los síntomas cambian rápido al acercarse al momento de morir.
    - Influyen en la decisión sobre el lugar de muerte.
      - 50-60%
  - Proporción del lugar de muerte
    - WHO y CommonsSelectCommitteonHealth
      - Aumento de muertes en Hospital
      - Falta de congruencia con el deseo
        - Morir en domicilio.

Davies E et al. WHO Regional Office forEurope, 2004.
HouseofCommonsHealthCommitee, 2004.

Muerte en casa vs muerte en el hospital

Home or hospital? Choices at the end of life

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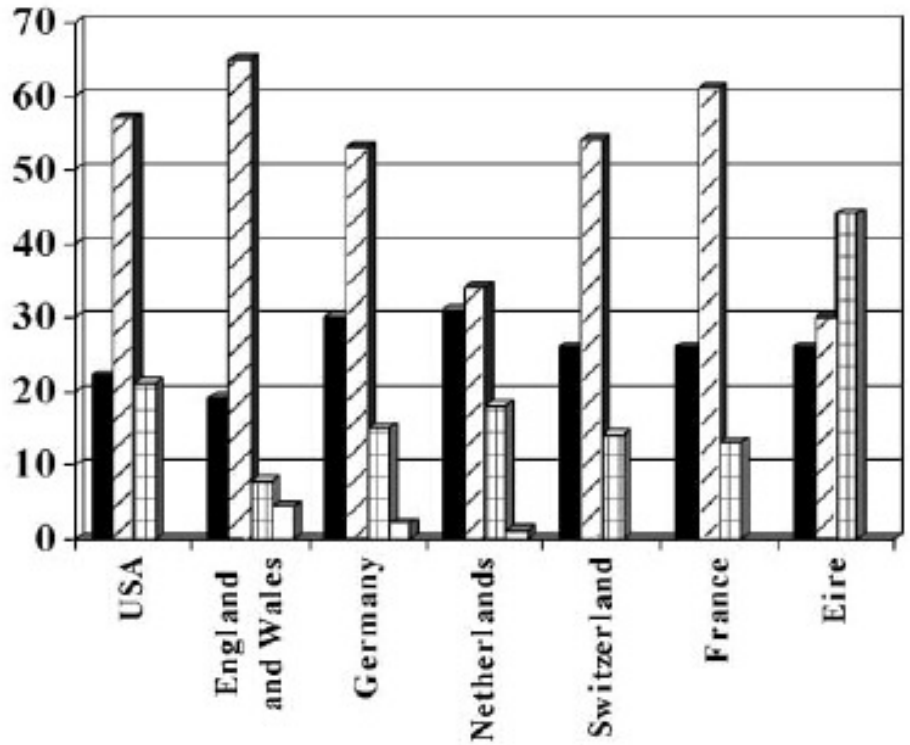


Figure 1 Preliminary data on place of death by country.
Home; Hospital; Nursing home; Inpatient hospice.
[Source: Palliative Care: the Solid Facts, WHO 2004 (1)]

Muerte en casa vs muerte en el hospital

Where People Die: A Multilevel Approach to Understanding Influences on Site of Death in America

Andrea Gruneir, Vincent Mor, Sherry Weitzen, Rachael Truchil, Joan Teno and Jason Roy

- Estudio Transversal
- Sistema de Estadística de datos Vitales
  - USA
  - Año 1997
  - N= 1,402167

Med Care Res Rev 2007.64;351

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Where People Die: A Multilevel Approach to Understanding Influences on Site of Death in America

Andrea Gruneir, Vincent Mor, Sherry Weitzen, Rachael Truchil, Joan Teno and Jason

Table 1

Sample Characteristics

	Total Sample $N = 1,402,167$	Died in Hospital $n = 740,405$	Died at Home $n = 330,447$	Died in Nursing Home $n = 331,315$
Gender				
Male	47.9	57.3	25.5	17.2
Female	52.1	48.7	21.8	29.5
Age				
<65	20.9	64.4	29.2	6.4
65–74	21.2	59.3	28.1	12.6
75–84	30.8	52.7	22.7	24.6
85–94	22.8	40.8	16.9	42.3
95+	4.2	28.0	14.5	57.6

Med Care Res Rev 2007.64;351

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Sample Characteristics

	Total Sample $N = 1,402,167$	Died in Hospital $n = 740,405$	Died at Home $n = 330,447$	Died in Nursing Home $n = 331,315$
Cause of death				
Heart disease	30.5	56.2	22.3	21.6
Cancer	25.1	41.9	40.1	17.9
Cerebrovascular accident	7.4	54.6	35.9	9.5
Chronic obstructive pulmonary disease	5.0	55.8	21.0	23.2
Pneumonia	4.1	63.6	4.6	31.9
Diabetes	2.2	55.1	22.4	22.5
Nephritis	1.1	65.6	10.7	237.0
Liver disease	1.3	68.1	20.8	11.1
Alzheimer's disease	1.0	16.6	16.8	66.6
Septicemia	1.1	82.2	1.7	16.1
HIV/AIDS	0.9	66.7	20.4	12.8
Congestive heart failure	3.6	46.3	27.4	26.4
Other	16.8	57.2	15.3	27.5

Med Care Res Rev 2007.64;351

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Results of the Multivariable Analysis for Decedent Level Characteristics

Risk of Dying in Hospital vs. Home

Parameter	Odds Ratio	95% Confidence Interval		Chi-Square
Female	1.00	0.99	1.01	0.46
Age				
<65	Reference			
65–74	1.00	0.98	1.01	0.54
75–84	1.00	0.99	1.02	0.12
85–94	0.92	0.91	0.93	110.16
95+	0.64	0.62	0.66	832.37
Cause of death				
Pneumonia	13.61	13.06	14.17	15796.5
Diabetes	2.14	2.08	2.21	2574.23
Nephritis	5.42	5.14	5.71	4021.26
Liver Disease	2.98	2.87	3.10	3132.8
Alzheimer's	0.93	0.88	0.99	5.14

Med Care Res Rev 2007.64;351

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Factors Associated With Site of Death

A National Study of Where People Die

SHERRY WEITZEN, MS, MHA,*† JOAN M. TENO, MD, MS,*† MARY FENNELL, PHD,*‡ AND VINCENT MOR, PHD*†

TABLE 3. Adjusted Odds Ratios for Factors Associated With Site of Death

	Home (vs. Hospital)		Nursing Home (vs. Hospital)	
Covariate	OR (95% CI)	*P*	OR (95% CI)	*P*
Decline 5 months before death				
No decline (ref)	1.00		1.00	
Moderate decline	1.46 (0.985–2.178)	0.059	0.94 (0.586–1.505)	0.792
Rapid decline	1.57 (1.114–2.214)	0.010	3.33 (2.217–5.014)	<0.001

N= 10122

1% muestra aleatoria

Medical Care. 2003.21(2);323-335

Muerte en casa vs muerte en el hospital

- Edad, causa de muerte y estado funcional previo influyen en el sitio del fallecimiento
- Resultados similares en otros estudios
  - Beng A et al. Ann AcadMedSingapore 2009;38:676-83
    - China
  - Van derHide A et al. Support Care Cancer 2007. 15;1413-1421
    - Países bajos
  - Lock et al. BMC Palliative Care 2005.4;6
    - Reino Unido

Muerte en casa vs muerte en el hospital

- Aun y en servicios de salud adecuados
  - 5 a 10% tiene acceso a sistemas de cuidados paliativos
    - 60% médicos familiares.
      - 70% dos visitas al mes
        - < 2 hrs/consulta mensual

Baillargeon L. CanadianFamilyPhysician 2003.49;1581-1583

Muerte en casa vs muerte en el hospital

- Mejor lugar para morir
  - McWhinney et al: aquellos que acudían al hospital
    - Edad= 68.5 años
      - Pacientes en estado terminal por neoplasia
    - 85 % tenían a un responsable
      - Esposo de la misma edad
        - P<0,005
    - No cubrir las demandas del paciente
      - P<0,005

Dudgeon D et al. CAN MED ASSOC J. 1995;152(3):237-340

Muerte en casa vs muerte en el hospital

Dying at home or in an institution: perspectives of Dutch physicians and bereaved relatives

Agnes van der Heide · Elsbeth de Vogel-Voogt · Adriaan Ph. Visser · Carin C. D. van der Rijt · Paul J. van der Maas

- Cohorte retrospectiva
  - Pacientes en cáncer terminal
    - Con seguimiento de etapas finales
    - N:103
    - Holanda.
    - Edad: 65 años.

Support Care Cancer 2007.15;1413-1421

Dying at home or in an institution: perspectives of Dutch physicians and bereaved relatives

Table 2 Dying in an institution or at home: the physician's perspective

	Place of death		*P* value χ^2 test
	In institution (*N*=49) *N* (%)	At home (*N*=54)	
Physician's evaluation of dying process[a]			
Patient died peacefully	28/41 (68)	29/42 (69)	0.94
Patient was able to say goodbye to relatives	26/40 (65)	33/44 (75)	0.32
Patient was ready to die	15/41 (37)	31/44 (71)	0.002
Patient died suddenly and unexpectedly	13/42 (31)	14/44 (32)	0.93
Patient's dying was preceded by period of agitation	25/40 (63)	29/41 (71)	0.43
Patient's dying was preceded by period of unconsciousness	30/39 (77)	26/42 (62)	0.14
Physician discussed with patient medical decisions that could shorten life			
Forgoing treatment	13/49 (27)	15/50 (30)	0.70
Intensified pain treatment	16/49 (33)	16/50 (32)	0.95
Sedation	15/49 (31)	8/50 (16)	0.09
Euthanasia	18/49 (37)	19/50 (38)	0.90
Life was possibly shortened due to			
Forgoing treatment	15/47 (32)	14/52 (27)	0.59
With clear consent of the patient	11/12	12/13	
Life was shortened by more than 1 week	4/11	0/9	
Use of potentially life-shortening drugs	16/46 (35)	13/45 (29)	0.55
With clear consent of the patient	12/14	9/10	
With the explicit goal of shortening life	1/16	4/13	
Life was shortened by more than 1 week	1/13	2/10	

Van derHeide A et al.Support Care Cancer 2007.15;1413-1421

Dying at home or in an institution: perspectives of Dutch physicians and bereaved relatives

Table 4 Dying in an institution or at home: perspective of bereaved relative

	Place of death		*P* value *t* test	*P* value χ^2 test
	In institution (*N*=29)	At home (*N*=34)		
Number of days patient stayed at place of death [mean (SD)]	7 (6)	59 (35)	0.000	
Number of transfers [mean (SD)]	1.9 (1.7)	1.2 (1.3)	0.047	
Number of disciplines involved with patient [mean (SD)]	6.1 (2.3)	5.8 (1.9)	0.64	
Number of clinical specialties involved with patient [mean (SD)]	2.2 (1.2)	1.8 (0.8)	0.011	
Patient [*n* (%)]				
Was fatigued	22 (79)	29 (88)		0.33
Had loss of appetite	22 (76)	30 (88)		0.20
Had pain	20 (69)	29 (85)		0.12
Had dyspnoea	18 (62)	17 (52)		0.40
Had mouth or mucous problems	18 (62)	16 (49)		0.28
Was incontinent	20 (69)	13 (38)		0.015
Had nausea	9 (32)	10 (30)		0.88
Had bedsores	5 (17)	13 (38)		0.07
Was confused	14 (48)	10 (29)		0.12
Suffered from anxiety	12 (41)	5 (15)		0.021
Was depressed	3 (10)	2 (6)		0.54
Evaluation of care during the last 3 days of life [*n* (%)]				
Assistance with personal care was sufficient	27 (93)	32 (94)		0.87
Nursing care was sufficient[a]	26 (90)	33 (97)		0.23
Relative was involved in decision-making	25 (89)	33 (97)		0.22
Relative was sufficiently involved in decision-making	24 (89)	33 (100)		0.049
Patient might have disagreed with medical decision(s)	4 (15)	1 (3)		0.10
Relative disagreed with medical decision(s)	7 (24)	7 (21)		0.78
It had been clear that patient was dying	18 (67)	26 (79)		0.29

Van derHeide A et al.Support Care Cancer 2007.15;1413-1421

Muerte en casa vs muerte en el hospital

- Aun controversial cual es el mejor lugar
  - Asegurarse de cumplir
    - Control de disnea
    - Control de dolor
    - Control de depresión

Lorenz K et al. Ann InternMed. 2008.148;147-159

Muerte en casa vs muerte en el hospital

- Indicaciones para hospitalizar
  - Mal control de
    - Dolor
    - Disena
    - Agitación
  - Sangrado
  - Estado epiléptico

Pantilat S et al. MedClin N Am 2008.92:349-370

Muerte en casa vs muerte en el hospital: Conclusiones

- El número de muertes en el hospital va en aumento
  - En ocasiones poca congruencia con el deseo del paciente
- Factores asociados con el lugar para morir
  - Edad, enfermedad y estado funcional previo
- Cual es el mejor lugar aun controversial
  - Aparente poca diferencia
  - Deseo del paciente el cual es dinámico
- Asegurarse
  - Dolor, Disnea y Depresión
- Considerar situaciones especiales de hospitalización.