

Assess End of life Care Knowledge and Attitude among Nurses of a Public Tertiary Hospital at Lahore

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Abstract: Nurses are present at both the beginning and the end of life, and play a key role in caring for dying patients. It clearly indicates that role of nurses can never be ignored when we are talking of end of life care or palliative care. Palliative care is defined by literature as care that improves the quality of living in individuals who are facing life threatening problems and illness to prevent and treat them through early identification of pain and other physical and psychosocial problems. The main purpose of this study was, to assess palliative care knowledge and attitude among nurses of Mayo Hospital Lahore. A cross sectional descriptive survey was performed to assess the knowledge and attitude level. A simple random sample of n=150 was used. A structured questionnaire with demographic data, knowledge and attitude of palliative care was applied. The data was analyzed on SPSS version 21. 36% of the study participants had poor knowledge, 49.33% of the study participants had average knowledge and very less number of participants that is only 14.7% of the study participants had good knowledge of palliative care. Findings reveals that 33.33% of the study participants had negative attitude towards care of end of life among terminally ill patients, while 66.7% had positive attitude towards end of life care. Knowledge was poor among majority of the participants but attitude was found positive among them

Keywords: End of life care, Knowledge of palliative care, Attitude, Nurses.

INTRODUCTION

Health indicators are improving day by day with the help of advancement in health care facilities and technologies. One of the indicators is life expectancy which is increasing with the help of new treatments and preventive measures. It is true that the life can be prolonged but there is another fact that this life is going to end one day. As it is stated that Death is an inevitable phenomenon that affects every human being [1]. The role of nurses is very important at every step of individual's life especially when they are sick. When the age is advanced and the health is compromised, and especially at the end of life, the nurses are playing an important role to serve. According to studies, Nurses are present at both the beginning and the end of life, and play a key role in caring for dying patients [1]. It clearly indicates that role of nurses can never be ignored when we are talking of end of life care or palliative care. Palliative care is defined by literature as care that improves the quality of living in individuals who are facing life threatening problems and illness to prevent and treat them through early identification of pain and other physical and psychosocial problems[2]..

Many patients and their families, who are facing the end of life decision, do not want to undergo the advanced treatment like mechanical ventilator, chemotherapy and cardiopulmonary resuscitation. Palliative care is one suitable strategy required to help those patients who do not want to undergo the advanced therapy and who may not have any other treatment option to reverse their condition to have quality life [3]. The role of nurses is very central during palliative care and end of life care. Nurses are vital members of any health care setup. They spend a huge time of contact with their clients. Spending long times with the patients make them able to have detailed information about the patients and their caregivers. According to another literature study "the expert nurses can provide physical care, emotional support, symptomatic management, education to patient and family, manage suitable environment for patients during palliative care" [4]. During this period the nurses take care of clients, develop plans for them, have supporting role with other staff members and provide guidance to patients and their families.

We are living in the developing part of the world, where the concept of palliative care is very new. The evidenced based approaches are lacking in this part of the world. This palliative care is very much important for nurses to deliver their best at the time of end of life decision. The nurses in developing countries need a lot of support and education to provide effective palliative and end of life care to their patients. According to literature "the significance of a knowledge deficit of palliative care has been seen throughout various studies. Hence, the first step in developing a strategy to support and educate nurses about palliative care is to assess their current knowledge" [4].

Palliative care is having so many difficulties for clinical nurses. Few problems are identified by studies and they are " Deficient trained health care workers especially nurses, difficulty in understanding the concept of palliative care among nurses and other health care workers, unavailability of hospice and day care centers, lack of any proper framework, no funding for palliative care, not enough training for home caregivers, Low health care facilities etc [5]. According to literature "It is found that Nursing students and their teachers do not have enough basic knowledge of Palliative Care that which is required for the provision of quality care to terminally ill patients [3].

A study was conducted by Ayed, A. *et al.* [1], to assess the Nurses' Knowledge and Attitudes towards the Palliative Care. According to this study the knowledge assessment was classified as poor, fair and good knowledge. Those who scored less than 50% on questions of knowledge about palliative care were referred as having poor knowledge, 51-75% correct responses were considered as fair knowledge and correct responses above 76% were accepted as having good knowledge. The result findings according to this scale showed that a very high number, 45.8% of the nurses who participated in this study were having poor knowledge, 33.3% of the respondents were having fair knowledge and only 20.8% of the study participants were having good knowledge [1].

Another research conducted by [6], studied the knowledge, attitude and practice and factors associated with palliative care. The findings of the study reveal a very high number that is more than 76% of the participants had poor knowledge about the palliative care. It was also found that 54% of the participants initiated palliative care conversations with clients at the time of their diagnosis and 49% of the participants were able to inform the clients regarding their diagnosed status. Majority of the study participants perceived that terminally ill patients' need is to treat them as they needed [6].

Another study conducted about the knowledge assessment about palliative care among nurses by [7], shows the following results. The results suggest that a huge number of 79% nurses had inadequate or poor knowledge, 21% nurses had moderate knowledge about palliative care and there was not a single nurse to have adequate knowledge regarding the palliative care. Furthermore, it was also found that the nurses were having maximum knowledge on the psychological and spiritual aspects of palliative care, which is 55% nurses, knew about these aspects. About 53.2% nurses who participated in the study knew the definition of palliative care and principles of palliative care. Moreover 40.6% staff nurses had knowledge on pain management of palliative care [7].

A study conducted by [2], on the Nurses' Knowledge about palliative care presented the following results. General score about the palliative care knowledge was about 53%. 33.8% of the nurses who participated in the study believed that palliative care should be provided to only those for whom the curative treatment is not available. The nurses were also asked about the goal of pain management, 77% of the study participants stated that the main aim of pain management is to have a peaceful night sleep. Furthermore about 70% nurses stressed that prolonged use of opioids analgesics can lead to addiction. When the questions were asked about the gastro intestinal system problems, 63.4% of the participants stated that during palliative care a high calorie intake is necessary [2].

AIMS OF THE STUDY

To assess the Palliative Care knowledge level of nurses at Mayo Hospital Lahore Pakistan

To assess the Palliative care attitude of nurses at Mayo Hospital Lahore Pakistan

SIGNIFICANCE OF THE STUDY

After assessing the knowledge and attitude of nurses about palliative care, it will help to understand the nurses' weakness in term of knowledge. It will help to develop certain goals for the provision of a respected means of life and death and will improve their quality of life. Nurses will be able to have quality knowledge and will play a vital role to help and meet patients' and their family needs and wants

METHODS

Setting

The setting for the study was Mayo Hospital Lahore which is a large hospital with all advanced treatment resources and covering a huge population of the Punjab province. At this hospital the nurses were assessed for their level of knowledge, understanding

and attitude regarding the palliative care towards the terminally ill patients.

RESEARCH DESIGN

A cross sectional descriptive survey was used to assess the knowledge level among nurses regarding the palliative care among terminally ill patients. The frequencies and percentages of correct and incorrect responses were found in the form of prevalence where cross sectional are more suitable designs. During this study the data was collected at one point in time simultaneously, therefore cross sectional design is effective.

POPULATION

The targeted population for this study was the registered nurses of Mayo hospital, who were working in different units of the hospital. Nurses on regular basis come across patients who are having end of life situation and are on terminal stage of life. At that time the care is provided just to ease their discomfort and is termed as palliative care. Mayo hospital is a well-known tertiary care hospital where the nurses are having rich experience of dealing with such serious ill patients on daily basis.

SAMPLING

To select the required sample a random probability sampling method was used. List of nurses working at different units are made and then the required sample was drawn randomly. Random probability samples are very good in terms of avoiding biasness. For this small descriptive study a sample of n=150 registered nurses was required.

RESEARCH INSTRUMENT

Data was obtained with the help of closed ended multiple choice knowledge and attitude based

self-administered questionnaire. The questionnaire composed of different questions about knowledge regarding palliative care. The questionnaire consisted closed ended structured questions along with different answer options as agree and disagree. The participants were instructed to fill the questionnaire in about 30 minutes and return the complete questionnaires. The complete returned questionnaires will be undergone through the process of analysis.

METHODS USED TO ANALYZE DATA

Statistical Package of Social Sciences (SPSS) version 21 will be used to analyze the findings of the study. The results will be presented in the form of tables and graphs.

STUDY TIMELINE

The data was collected from February, 2018 to April, 2018.

ETHICAL CONSIDERATION

Permission was taken from the principal National college of Nursing and the supervisor. Then permission was granted from the HOD of Mayo Hospital Lahore. During the study the participants were respected for their rights. All the participants were recruited for the study after their permission. They were given the right if they want to participate or not participate. For this purpose a proper written informed consent was given to the study participants. Secondly the confidentiality of the study participants was maintained. The data was provided codes on computers and the information collected from participants were not shared unnecessarily.

RESULTS

Table-1: Demographic frequency

Variables	Number (n)	Per cent
Gender		
Male	00	00
Female	150	100
Age:		
18-25 years	36	24
26-35 years	78	52
36-50 years	24	16
Above 50 years	12	8
Marital Status:		
Single	96	64
Married	54	36
Education:		
Nursing Diploma	90	60
BSN/PRN BSN	54	36
MSN/MPH	6	4

Below table 1 presents that among the study participants, there was no male, all 100% were female. According to age category, 24% participants were age 18-25 years, 52% participants were having age between 26-35 years, 16% were from 36-50 years of age and 8% were above 50 years old. Of the

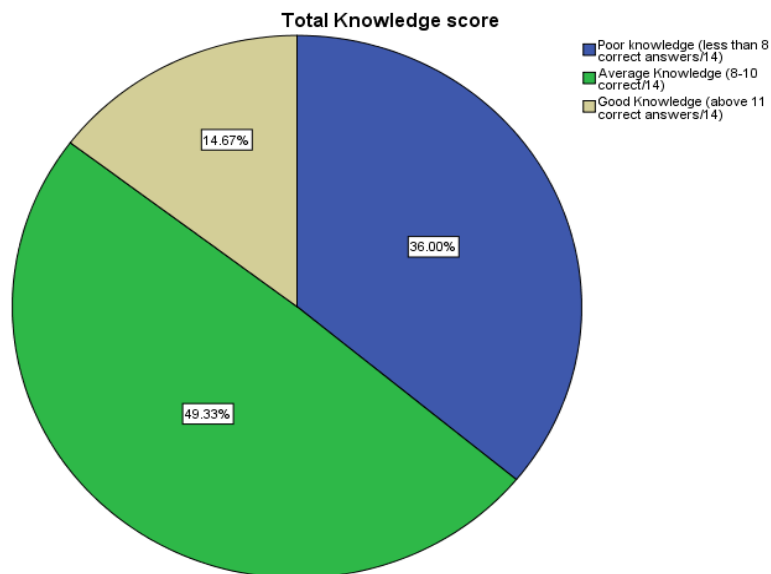
participants, 64% were unmarried and remaining 36% participants were married. From the participants, 60% participants were only having nursing diploma with or without specialization, 36% of the participants were BSN or post RN BSN and remaining 4% of the study participants were MSN or MPH qualified.

Table-2: Frequency and Percentage of Knowledge of palliative care

S.NO	Statement	Correct		Incorrect	
		N	%	N	%
1.	Do you know the definition palliative care?	87	58	63	42
2.	Palliative care is only appropriate in situations of a downhill trajectory or deterioration in conditions.	106	70.6	44	29.4
3.	The extent of the disease determines the method of pain treatment.	115	76.7	35	23.3
4.	Adjuvant therapies are important in managing pain.	111	76	39	24
5.	Drug addiction is a major problem when morphine is used on a long-term basis for the management of pain.	82	54.7	68	45.3
6.	The provisions of palliative care require emotional detachment.	80	53.3	70	46.7
7.	During the terminal stages of an illness, drugs that can cause respiratory depression are appropriate for the treatment of severe dyspnea	111	74	39	26
8.	The philosophy of palliative care is compatible with that of aggressive treatment.	98	65.3	52	34.7
9.	The use of placebos is appropriate in the treatment of some types of pain.	61	40.7	89	59.3
10.	Meperidine (Demerol®) is not an effective analgesic for the control of chronic pain.	56	37.3	94	62.7
11.	The accumulation of losses renders burnout Inevitable for those who work in palliative care.	85	56.7	65	43.3
12.	Manifestations of chronic pain are different from those of acute pain.	57	38	93	62
13.	Terminally ill patients have the right to choose "Do not resuscitate" (DNR).	117	78	33	22
14.	Terminally ill patients should be encouraged to have hope against all odds.	105	70	45	30

Table 2 shows the results of Knowledge questions from the participants given below. In response to a question if nurses know the definition of palliative care, 58% knew about it while 42% gave wrong answer about it. The participants were asked about the palliative care use in deterioration conditions, where 70.6% participants gave correct response while 29.4% gave wrong response. About the extent of knowledge and method of pain relief question, 76.7% knew about it while 23.3% did not know and answered incorrectly. To the question of use of adjuvant therapy along with pain management therapy, 76% answered correctly and 24% answered incorrectly. When the morphine is used for too long, the drug addiction becomes a major issue, which correctly answered by 54.7% of the study participants and 45.3% gave wrong answer for it. Regarding the palliative care and emotional detachment concept, 53.3% responded right answer while 46.7% gave wrong response for it. To the question of drugs that can cause respiratory depression are appropriate for the treatment of severe dyspnea, 76% answered correctly and 24% answered

incorrectly. In response to a question if palliative care is compatible with that of aggressive treatment, 65.3% knew about it while 34.7% gave wrong answer about it. The participants were asked about the use of placebos is appropriate in the treatment of some types of pain, where 40.7% participants gave correct response while 59.3% gave wrong response. About the question that Meperidine is not an effective analgesic for the control of chronic pain, 37.3% knew about it while 62.7% did not know and answered incorrectly. To the question accumulation of losses renders burnout Inevitable for those who work in palliative care, 56.7% answered correctly and 43.3% answered incorrectly. To a question, chronic pain is different from those of acute pain, which correctly answered by 38% of the study participants and 62% gave wrong answer for it. Regarding the question that terminally ill patients have the right to choose "Do not resuscitate", 78% responded right answer while 22% gave wrong response for it. To the question terminally ill patients should be encouraged to have hope against all odds, 70% answered correctly and 30% answered incorrectly.

**Fig-1**

The above graph and table of knowledge level of palliative care reveals that 36% of the study participants had poor knowledge that scored less than 8 marks out of 14 marks. 49.33% of the study participants had average knowledge that scored 8-10 marks out of total 14 knowledge based questions. Very less number of participants that is only 14.7% of the study participants had good knowledge of palliative care, which scored above 10 marks out of 14 total score.

The attitude were measured presented in above table 3 below. To a statement that Palliative care is given only for dying patient 6.7% of the study participants strongly disagreed, 26.7% disagreed with the statement, 13.3% remained neutral, 46.7% agreed and 6.7% strongly agreed to the statement. 6.7% stated with strongly disagreement that if patient nears death; the nurse should withdraw from his/her involvement with the patient, 13.3% participants disagreed with this, 13.3% remained neutral, 60% agreed to the statement and 22% strongly agreed to it. On a statement that Giving nursing care to the chronically sick patient is a worthwhile learning experience, 6.7% strongly disagreed, 20% disagreed, 6.7% remained neutral, 46.7% agreed to the statement and 20% strongly agreed to the question. On a question that verbalization is beneficial for the chronically sick persons, 20% participants disagreed, 10% remained

neutral, 53.3% participants agreed to the statement, and 20% strongly agreed. To a question that family concerned about helping their dying member make the best of end of life, where 33.3% participants disagreed, 20% were neutral and 26.7% participants agreed to the statement. To a question that Family should maintain as normal an environment as possible for their dying member, 6.7% strongly disagreed to this, 13.3% disagreed, 26.7% remained neutral, 33.3% agreed with it and 20% strongly agreed. To another question that the nurse the nurse should not be the one to talk about death with the dying person, 6.7% participants strongly disagreed, 13.3% disagreed to this, 20% remained neutral about it, 40% agreed to the statement and 20% strongly agreed. 6.7% stated with strongly disagreement that nursing care for the patient's family should continue throughout the period of grief and bereavement, 33.3% participants disagreed with this, 20% remained neutral, 33.3% agreed to the statement and 6.7% strongly agreed. On a statement that terminally ill patients have the right to choose "Do not resuscitate" (DNR), 13.3% strongly disagreed, 33.3% disagreed, 20% were neutral, 26.7% agreed to the statement and 6.7% strongly agreed to the question. On a question that dying person and his/her family should be the in-charge decision makers, 26.7% disagreed, 20% were neutral and 53.3% participants agreed to the statement.

Table-3: Attitude towards the palliative care

S. NO	Statement	Strongly Disagree		Disagree		Neutral		Agree		Strongly Agree	
		N	%	N	%	N	%	N	%	N	%
1. 1	Palliative care is given only for dying patient.	10	6.7	40	26.7	20	13.3	70	46.7	10	6.7
2. 2	As a patient nears death; the nurse should withdraw from his/her involvement with the patient.	10	6.7	20	13.3	20	13.3	90	60	10	6.7
3. 3	Giving nursing care to the chronically sick patient is a worthwhile learning experience.	10	6.7	30	20	10	6.7	70	46.7	30	20
4. 4	It is beneficial for the chronically sick person to verbalize his/her feelings.	00	00	30	20	10	6.7	80	53.3	30	20
5. 5	Family members who stay close to a dying person often interfere with a professionals' job with the patient.	10	6.7	20	13.3	00	00	90	60	30	20
6. 10	The family should be involved in the physical care of the dying person.	10	6.7	10	6.7	20	13.3	70	46.7	40	26.7
7.	It is difficult to form a close relationship with the family of a dying member.	10	6.7	30	20	10	6.7	80	53.3	20	13.3
8.	Nursing care for the patient's family should continue throughout the period of grief and bereavement.	10	6.7	50	33.3	30	20	50	33.3	10	6.7
9.	Terminally ill patients have the right to choose "Do not resuscitate" (DNR).	20	13.3	50	33.3	30	20	40	26.7	10	6.7
10.	The dying person and his/her family should be the in-charge decision makers.	00	00	40	26.7	30	20	80	53.3	00	00
11.	Addiction to pain relieving medication should not be a nursing concern when dealing with a dying person	10	6.7	30	20	20	13.3	80	53.3	10	6.7
12.	Nursing care should extend to the family of the dying person.	10	6.7	40	26.7	10	6.7	60	40	30	20
13.	When a patient asks, "Nurse am I dying? I think it is best to change the Subject to something cheerful.	10	6.7	30	20	10	6.7	70	46.7	30	20
14.	I am afraid to become friends with chronically sick and dying patients.	20	13.3	20	13.3	00	00	80	53.3	30	20
15.	I would be uncomfortable if I entered the room of a terminally ill person and found him/her crying.	10	6.7	50	33.3	30	20	60	40	00	00

DISCUSSION

The findings of this current study regarding knowledge level of palliative care reveals that 36% of the study participants were having inadequate knowledge of end of life care overall, they gave correct responses scored less than 8 out of 14 statements. Furthermore 49.33% of the study participants had moderate level of knowledge and scored 8-10 marks out of total 14 knowledge based questions. Few participants (14.7%) of the study participants had good

knowledge of palliative care; they scored above 10 marks out of 14 total score.

The result findings of a previous study found that 45.8% of the nurses who participated were having poor knowledge, 33.3% of the respondents were having fair knowledge and only 20.8% of the study participants were having good knowledge, which are similar to this current study [1].

Another such study found previously that 20% of the nurses were having adequate knowledge about palliative care, 69% of the study participants nurses had moderate level of knowledge and a small amount 11% of the nurse's participants had poor knowledge about palliative care [8].

Findings of current study found a general score of palliative end of life care as 58%, whereas in a previous study, general score about the palliative care knowledge was about 53%. During the present study, 70% of the participants believed that palliative care should be provided to only those for whom the curative treatment is not available whereas previously 33.8% of the nurses who participated in a study believed that palliative care should be provided to only those for whom the curative treatment is not available. Accordingly the nurses were also asked about the goal of pain management, 77% of the study participants stated that the main aim of pain management is to have a peaceful night sleep. During this current study, 54.7% nurses stressed that prolonged use of opioids analgesics can lead to addiction. Similarly in past studies 70% nurses stressed that prolonged use of opioids analgesics can lead to addiction [2].

The findings of a previous study reveal a very high number that is more than 76% of the participants had poor knowledge about the palliative care. It was also found that 54% of the participants initiated palliative care conversations with clients at the time of their diagnosis and 49% of the participants were able to inform the clients regarding their diagnosed status[9]. Majority of the study participants perceived that terminally ill patients' need is to treat them as they needed [6].

The findings of this study reveals that 33.33% of the study participants had negative attitude towards care of end of life among terminally ill patients, while a good majority 66.7% had positive attitude towards end of life care and scored above 80 out of total score 120. Study results have shown that 6.2 % of participants had good attitude towards PC whereas majority had moderate attitude to palliative care [1].

According to another study Out of the total study participants, very low number of participants, 104 (30.5%) had good knowledge about the end of life care, whereas a good number, 259 (76%) had favorable attitude towards Palliative Care [6].

LIMITATIONS

- Less sample size 150 due to which, the findings cannot be generalized.
- Time was too short, to see any prospective events or detailed associations of awareness and practices

CONCLUSION

This Study investigated that there was very low level of palliative care knowledge among nurses. Very low knowledge score was obtained by a large number of the study participants. The attitude was found positive among majority of the participants. It means that the nurses have very limited knowledge about the concept of palliative care but positive attitude.

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