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Truth Telling A Dilemma: To Tell or Not To Tell

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BACKGROUND

Breaking bad news is always a challenge when dealing with terminally ill patients and it's often not done in an effective manner. Caring for a patient is not a one man show; it is the responsibility of the entire health care provider to work in collaboration in order to give patient centered care. Many health care professionals believe that disclosure of bad news will be devastating for the patient but according to the research in which 147 cancer patients were selected from different hospitals in Pakistan which showed that anxiety level of 41.5% patients remained same and decreased in 18.4% patients (Jawaid, 2010). Moreover, the ratio of patients who were interested to know all the available treatment options was 57.1 and 69.4% were willing to be involved in decision making process about their treatment (Jawaid, 2010). Knowing the truth is the basic component of patient's autonomy. Hence this proved that despite of having fear of cancer majority of patients want to know about their diagnosis, prognosis and treatment and they want to be involved in plan of care. The key of successful relationship between healthcare provider and the patient is the trust which is connected with the trustful communication. Patients expect the truthful communication from their healthcare provider the same way as the healthcare providers expect from their patients that they will tell them the truth. Principle of beneficence is all about promoting the good and preventing patient from any harm. This means that the nurse should respect patient's autonomy. Disclosing truth about cancer diagnosis and prognosis may have helped her to finish her pending task, this could have given her the chance to spend quality time with her family.

INTRODUCTION

Cancer is a complicated disease. The word cancer brings lots of sorrow and pain with itself. Cancer was considered as untreatable disease in many cultures for many years. Whenever the word cancer comes in mind it's been linked with death, and therefore family members used to hide it from patient. Informing the patient regarding life threatening diagnosis can be devastating for the patient and it will be equal to dropping a bomb for the patient. Now a days health care professionals prefer to discuss health related information to patients. Thus, health care professionals are utmost responsible to provide complete information to the patients regarding their diagnosis, treatment plans and prognosis. It becomes very difficult for the health care

professional to break the bad news if the patient who is receiving the diagnosis of cancer has some underlying different cultural belief about personal autonomy and death.

This article aimed to discuss about the ethical dilemma arises at the time of the disclosure of sensitive information concerning the treatment and prognosis of terminally ill patients. Moreover, this article will throw some light on the challenges faced by the nurses when making an ethical decision.

DISCUSSION

This article aimed to discuss about the ethical dilemma arises at the time of the disclosure of sensitive information concerning the treatment and prognosis of terminally ill patients. Moreover, this article will throw some light on the challenges faced by the nurses when making an ethical decision.

Case Scenario:

A 48 years old female mother of two daughters was admitted in hospital with the complain of difficulty in breathing, on investigation it was revealed that patient was having tracheal stenosis and need to underwent emergency tracheostomy tube insertion to relieve breathing obstruction. Patient was NPO from last 8 hours and at the last moment Cardio thoracic surgeon (CTS) refused to perform the surgery without giving any valid reason; when the primary team came to visit the patient they got aggressive due to CTS decision and they planned for immediate biopsy. Due to urgency, the report was handed over to the consultant within half an hour which revealed that patient is having cancer and it is metastasized to the lungs. Primary consultant came to the patient and said that "everything is fine and do not worry", he then took her daughter and husband outside the special care unit and revealed the bad news of cancer and the family changed the patient code status from full code to DNR with pharma without taking consent from the patient. After two days of diagnosis she passed away.

The Ethical Dilemma:

Informing the patient regarding life threatening diagnosis can be devastating for the patient and it will be equal to dropping a bomb for the patients. Truth telling is considered as cornerstone in cancer care area (Friedrichsen, 2010). According to Code of Ethics for Nurses (2001), nurses are

responsible to advocate for patient safety, comfort and self-determination. According to American Nursing Association (2010), the counselling provided by the nurse to patients regarding end of life honors patient's autonomy and prepare them in making difficult decisions. To cope with cancer hope is the very important factor, and patient closed one's were being emotional at that time to not to break that hope, for them at that time breaking bad news could have shattered patient's all the hopes and dreams which would have been very difficult for patient to cope up. In this situation, being as an advocator for patient nurse remained passive member and was in a dilemma that whether she should listen to patient family and leave her patient in a dark by giving her false hope; by keeping in mind the principle of beneficence or shall she abide with the Code of Nursing Ethics and disclose the truth to the patient. The nurse's code of ethics articulates nursing profession ethics and values by affirming that nurses are patient's advocators and they continuously strive for patients health and safety rights. (ANA, 2001,) Although patient's family took the decision for the patient and restricted nurse to not to disclose the news to the patient. However, the nurse is expected to be professional and stay true with patient and follow Nursing Code of Ethics (ANA, 2001,).

Patient's autonomy:

Since the past few decades, the view about telling the truth in terminally ill patients, was influenced by a paternalistic tradition. But in recent decades medical environment is shifted from paternalistic approach of the physician towards the promotion of respect for patient autonomy.

According to the International Code of Medical Ethics (2006), a health care professional should act in the patients best interest when providing medical care, respecting his/her right to accept or refuse treatment. It implies that patient knows better about his/her goals. On the other hand, patient's decision may conflict with the physician's decision in regards of beneficence. This conflicting decision often becomes the challenging issue for the physician to prioritize patient's beneficence. In such circumstances, physician should ensure that the patient is fully aware about the risk, benefit and available treatment modalities in order to take best decision in his/her interest.

Caring for a patient is not a one man show; it is the responsibility of the entire health care provider to work in collaboration in order to give patient centered care. After reflecting in action, I now understood that at that time I was preconceived with the idea that giving the bad news is the only responsibility of the doctor and with this I was disclaiming with my responsibility; that being as a patient advocator it is my prime responsibility to advocate for the patient in all the situations and to ensure that patient true wishes are been respected and heard (Kazdaglis, 2010). Moreover, I was having the thought that disclosure of bad news will be devastating for the patient but according to the research in which 147 cancer patients were selected from different hospitals in Pakistan which showed that anxiety level of 41.5% patients remained same and decreased in 18.4% patients. Moreover, the ratio of patients who were interested to know all the available treatment options was 57.1 and 69.4% were willing to be involved in decision making process about their treatment (Jawaid, 2010).

Knowing the truth is the basic component of patient's autonomy. Hence this proved that despite of having fear of cancer majority of patients want to know about their diagnosis, prognosis and treatment and they want to be involved in plan of care. The key of successful relationship between healthcare provider and the patient is the trust which is connected with the trustful communication. Patients expect the truthful communication from their healthcare provider the same way as the healthcare providers expect from their patients that they will tell them the truth. Principle of beneficence is all about promoting the good and preventing patient from any harm. This means that the nurse should respect patient's autonomy. Disclosing truth about cancer diagnosis and prognosis may have helped her to finish her pending task, this could have given her the chance to spend quality time with her family. Moreover, she could have said goodbye to her family. Therefore, truth telling could have benefited her in many ways. Thus, patient should not be kept in dark regarding the diagnosis and the prognosis of the disease on the basis of family wish (Punjani, 2013). In order to deliver bad news to the patient SPIKE clinical protocol can be used which includes, proper setting should be provided for breaking the news, evaluate patient's perception of the condition, obtain the patient's invitation, present the knowledge and information, recognize patient's emotions through empathic responses, and strategy and summary (Abbaszadeh, 2014). To conclude, reflection in action gave me the chance to learn that nurses are always forefront in regards to patient care in hospital and they deal with them on regular basis, that is why it is the biggest dilemma for nurses and they should be committed in delivering the truth to the patient and should support the patient and their family in such a difficult time.

Above all, another reason that kept me the passive healthcare member was the belief that physicians are responsible for the disclosure of the bad news to the patient. As been taught in our profession, we being as a nurse cannot communicate the patient's diagnosis to the patients directly we will refer them to the physician and they will tell them the complete course of treatment.

CONCLUSION

I concluded and decided to reflect upon this situation because being as a primary nurse I observed that, patient right to know about the diagnosis and treatment was being violated. Moreover, patient family members were also having the tendency of withholding the information from patient to prevent her from hopelessness.

Way Forward:

- 1- Paramedical team and nurse in particular who deal with the patients should be trained about effective methods of communication skills in delivering the bad news to the patient and family.
- 2- Patient should be involved in all the decision been taken so his/her treatment and patient centered care should be provided.

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