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3 **Title: Advance Directive Discussion**
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5 **Submitted by: Brian Silver, MD, for the Wayne County Delegation**
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7 **Original Author: Brian Silver, MD**
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9 **Referred to: Reference Committee E**
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11 **House Action: Adopted as Amended**
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14 **Whereas, end-of-life discussions are associated with less aggressive**
15 **medical care near death and earlier hospice referrals¹, and**

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17 **Whereas, aggressive care is associated with worse patient quality of life**
18 **and worse bereavement adjustment¹, and**

19
20 **Whereas, patients with advanced cancer who report having end-of-life**
21 **conversations with physicians have significantly lower health care costs in**
22 **their final week of life², and**

23
24 **Whereas, higher costs are associated with worse quality of death, and²**

25
26 **Whereas, one third of expenses in the last year of life are spent in the**
27 **final month with aggressive treatments in the final month accounting for 80**
28 **percent of those costs², and**

29
30 **Whereas, if half of the estimated 566,000 American adult cancer patients**
31 **who died in 2008 had an end-of-life discussion, the projected savings would**
32 **conservatively be \$77 million², and**

33
34 **Whereas, the American Medical Association affirms that patients have a**
35 **“right to take an active role in their own health care,”³ and**

36
37 **Whereas, the American Medical Association affirms that end-of-life care**
38 **“should include the opportunity to discuss scenarios and treatment**
39 **preferences with the physician and health care proxy, the chance for**
40 **discussion with others, the chance to make a formal "advance directive" and**
41 **proxy designation, and help with filing these documents in such a way that**
42 **they are likely to be available and useful when needed;”⁴ therefore be it**

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44 **RESOLVED: That MSMS evaluate and implement multiple measures**
45 **including, but not limited to, physician education and patient education that**
46 **will increase the number of Michigan citizens age 18 and older with an**
47 **advance directive.**

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50 **WAYS AND MEANS COMMITTEE FISCAL NOTE: NONE**

¹ Wright AA, Zhang B, Ray A, Mack JW, Trice E, Balboni T, Mitchell SL, Jackson VA, Block SD, Maciejewski PK, Prigerson HG. Associations between end-of-life discussions, patient mental health, medical care near death, and caregiver bereavement adjustment. *JAMA*. 2008 Oct 8;300(14):1665-73.

² Zhang B, Wright AA, Huskamp HA, Nilsson ME, Maciejewski ML, Earle CC, Block SD, Maciejewski PK, Prigerson HG. Health care costs in the last week of life: associations with end-of-life conversations. *Arch Intern Med*. 2009 Mar 9;169(5):480-8.

³ <http://www.ama-assn.org/ama/pub/physician-resources/medical-ethics/about-ethics-group/ethics-resource-center/end-of-life-care/advance-care-directives.shtml> (accessed 2-28-10)

⁴ <http://www.ama-assn.org/ama/pub/physician-resources/medical-ethics/about-ethics-group/ethics-resource-center/end-of-life-care/ama-statement-end-of-life-care.shtml> (accessed 2-27-10)