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Palliative sedation and moral distress: A qualitative study of nurses

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ABSTRACT

Background
Clinical nursing practice may involve moral distress, which has been reported to occur frequently when nurses care for dying patients. Palliative sedation is a practice that is used to alleviate unbearable and refractory suffering in the last phase of life and has been linked to distress in nurses.

Aim
The aim of this study was to explore nurses’ reports on the practice of palliative sedation focusing on their experiences with pressure, dilemmas and morally distressing situations.

Methods
In-depth interviews with 36 nurses working in hospital, nursing home or primary care.

Results
Several nurses described situations in which they felt that administration of palliative sedation was in the patient’s best interest, but where they were constrained from taking action. Nurses also reported on situations where they experienced pressure to be actively involved in the provision of palliative sedation, while they felt this was not in the patient’s best interest. The latter situation related to (1) starting palliative sedation when the nurse felt not all options to relieve suffering had been explored yet; (2) family requesting an increase of the sedation level where the nurse felt that this may involve unjustified hastening of death; (3) a decision by the physician to start palliative sedation where the patient had previously expressed an explicit wish for euthanasia.

Conclusions
Nurses experienced moral distress in situations where they were not able to act in what they believed is the patient’s best interest. Situations involving moral distress require nurses to be well informed and able to adequately communicate with suffering patients, distressed family and physicians.

Keywords: Moral distress, nurses, palliative sedation, qualitative research
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