

OP 009

**THE USE OF SEDATION FOR DYING PATIENTS:
ETHNOGRAPHIC STUDY IN THREE HOSPICES**

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Background and aims Palliative care philosophy, which simultaneously promotes a symptom-control focus and a rejection of intentions to hasten death, underpins recent frameworks guiding sedative use. This PhD-based study explores three research questions: 1. How do hospice doctors and nurses use drugs with sedative effect for their inpatients nearing the end of life? 2. What rationale, or justifications, are necessary in the deployment of these drugs? 3. What are the similarities or differences between three different inpatient hospice units when prescribing and administering these drugs?

Methods Three datasets were used: ethnography, through 150 hours of participant observation, of inpatient ward work undertaken by doctors and nurses in each of three hospices; audio-recorded, semi-structured interviews arranged with individual doctors and nurses; and two focus groups organised at each hospice, one comprising doctors and one comprising nurses (6–10 participants in each). The stimulus materials used in the focus groups concern anonymised clinical case-vignettes based on observed data. The collection and analysis of all data has been underpinned by a thematic qualitative approach and took place between May 2011 and January 2013.

Results and conclusions The empirical data reveal patterns in the repertoires and communication strategies clinicians use during clinical processes involving drugs with sedative effect: prescribing and administering drugs; handling of relatives' impressions; and discussing patients and/or relatives amongst themselves as a team. Differences were noted between hospices concerning the degree of latitude doctors gave to nurses when prescribing sedation, but an emergent theme uniting data from all hospices concerns the "emotion work" staff do with relatives to promote and maintain a state of calm in hospices. I argue that sedation is not necessarily solely deployed for the index patient, and that using drugs with sedative effect facilitates a negotiable need for nursing staff to keep ward order, helping to calm clinical situations which might threaten this.



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