

Analysis of Good Death from the Nurses Perspective

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INTRODUCTION

Health professionals working in palliative care have developed an idealized concept of dying which has been labeled the 'good' death. Analysis of good death was to examine the attributes of a good death and explore the changes of the concept over time and its impact on terminally ill patients. The method used for this analysis was the Rodgers' evolutionary method.

Palliative care is a crucial component in improving peoples' end-of-life period. It is important to understand the wishes of people at the end of life and the perceptions of their healthcare providers regarding these wishes. As nurses play a key role in patient care, in this study we set out to determine nurses' perceptions regarding what constitutes a "good death", comparing what they thought their older patients would prefer to their own preferences for their own end-of-life care.

There were major differences between the views of patients and staff. The patients' descriptions of a 'good' death were diverse and included: dying in one's sleep, dying quietly, with dignity, being pain free and dying suddenly. In comparison, staff characterized a 'good' death in terms of adequate symptom control, family involvement, peacefulness and lack of distress, while a 'bad' death was described as involving uncontrolled symptoms, lack of acceptance and being young. The findings suggest that patients and staff differ in their conceptualizations of a 'good' death.

DESCRIPTION

Life and death make individuals believe more meaningfully and deeply and trigger hope, control, and efficacy. Death is a biological event, i.e. the permanent stop of vital signs and function of the heart, and dying is also a procedural and social

issue experienced by each person within the cultural and social system of their society. Death is an inevitable fact, which all divine and non-divine religions have always mentioned throughout history.

It is an undeniable fact that all human beings tend to experience death with peace, honor, dignity, and away from suffering. With conscious being of death, man seeks to experience the best death state. The contemporary good death is expressed throughout the literature as a peaceful and dignified death, free from pain and other distressing physical symptoms, death is timely, it occurs in old age and follows a predictable course, and it occurs at home, with the dying individual surrounded by family members. Patients and families need to become aware of specific care options and supports that are available for them so they can be accessed in order to achieve their own "good death", and nurses have a unique responsibility related to this issue.

Nurses should have skills, knowledge, experience and ability to provide high quality care including; establishing communication with the patient, controlling anxiety, the ability to talk about death if the patient wishes, encouraging the patient and his relatives to express emotions, supporting the patient and family, during the grief period, assessing and controlling pain, spiritual support for the end of life patients and their families, to achieving a "good death. Nurses need to know what death is, what does it mean to die peacefully? What are the definitions for these concepts? Why is it important to study this phenomenon in nursing as an independent field? In the scientific literatures, similar expressions such as dying well, dying peacefully, appropriate death, desired death, or dignified death, sometimes synonymously and sometimes as distinct from each other are used. However, there is no clear definition of constitute and features a good death. It seems further studies is need for definitions and development of this concept in nursing.

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