

Living wills: a survey of the attitudes of general practitioners in Scotland

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SUMMARY

This postal survey examined Scottish general practitioners' (GPs') attitudes to living wills, their experience of living wills, and knowledge of the British Medical Association (BMA) code of practice on living wills. It revealed that, while Scottish GPs have a positive attitude towards living wills, only a minority is aware of the BMA's code of practice.

Keywords: *living wills; advance directives; doctor-patient communication.*

Introduction

IN 1995, the British Medical Association (BMA) published a code of practice on living wills, *Advance statements about medical treatment: code of practice with explanatory notes*.¹ Although the BMA code takes a broad and pragmatic approach to living wills, and on the whole is of the view that carefully discussed living wills have an important place in the development of a more balanced partnership between patients and doctors, it notes that there are both benefits and dangers to making treatment decisions in advance. However, what is unknown is to what extent United Kingdom (UK) doctors have positive or negative views of living wills. The aim of this study was to investigate general practitioners' (GPs') attitudes and experiences in relation to living wills, plus their knowledge of the BMA code of practice on living wills.

Method

Data were collected via a postal survey sent to all GPs working in two Health Boards in the West of Scotland. Of the 859 GPs sent questionnaires, 412 (48%) returned the questionnaire after the first posting. A reminder resulted in the return of another 105 completed questionnaires, yielding an overall response rate of 60%.

Results

Are GPs in favour of living wills?

Forty-four per cent of GPs reported that they were in favour of living wills and 15% reported that they were not in favour of living wills. Agreement and disagreement with the most common arguments for and against living wills can be seen in Table 1.

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Submitted: 10 November 1997; final acceptance: 23 October 1998.

© British Journal of General Practice, 1999, 49, 641-642.

How much experience have GPs had with living wills?

Forty-three per cent of GPs reported that they had been asked about living wills by one or more patients; however, the number of instances was small. Although the majority of GPs had been asked by only a few patients, there was evidence that the level of interest was increasing.

How informed were GPs about the BMA code of practice on living wills?

Thirty-nine per cent of responders had seen the BMA code of practice relating to living wills but few had read it in detail. It is interesting to note that those who had read the code were less likely to report needing more information, while those who had not heard, seen, or read the code reported needing more information about living wills.

Discussion

Scottish GPs appear to have favourable views of living wills, viewing them as a good method of doctor-patient communication. However, general statements are not viewed as very helpful. Over half disagreed with the notion that doctors would not have time to discuss living wills with patients.

It was not expected that such a high percentage of responders would have been asked about living wills by patients. However, in most cases only a few patients had asked, suggesting that, while interest in living wills may be growing, GPs are not being inundated with patients wanting to draw up living wills.

We were somewhat surprised to find that so few GPs had copies of the BMA code of practice on living wills, as well as how many had not heard of it at all. However, in light of the fact that GPs would have had to have known not only that it existed, but also to send £4.99 to receive a copy, it is perhaps not surprising that there are so few copies in circulation.

Conclusions

Scottish GPs appear to have quite positive attitudes towards living wills. Only a minority of patients have asked to have living wills lodged in their medical records, and the number who have discussed living wills with their GPs is very small. This might account for the rather low levels of awareness of the BMA's code of practice on living wills.

Reference

1. British Medical Association. *Advance statements about medical treatment: code of practice with explanatory notes*. London: BMJ Publishing Group, 1995.

Acknowledgements

This study was supported by a grant from the Royal College of General Practitioners. We would like to thank all the GPs who returned their postal questionnaires.

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Table 1. Percentage of GPs who agreed with common statements concerning living wills.

Common arguments for living wills	Strongly agree (%)	Agree (%)	Unsure (%)	Disagree (%)	Strongly disagree (%)
Doctors will be less likely to practice defensive medicine if a patient has a living will	4.3	42.4	26.7	22.6	2.5
Living wills are a good method of doctor–patient communication	5.4	47.8	22.2	18.6	4.6
Living wills are a good method of patient–relative communication	7.2	53.2	22.4	11.4	4.3
Doctors will find it <i>psychologically</i> easier to withdraw futile treatment if a patient has a living will stating that 'extraordinary' treatment is not wanted	15.5	58.8	11.4	9.9	3.3
Common arguments against living wills					
General statements about withdrawing or withholding treatment are unhelpful to doctors	7.0	41.2	18.4	31.5	0.6
Since patients cannot anticipate all circumstances, a living will can never be <i>specific</i> enough to aid the doctor	6.8	32.3	23.2	34.8	1.2
Doctors do not have time to discuss the contents of a living will with patients	5.2	22.1	10.3	52.0	8.7
Pressure will be put on patients to make out a living will in order to justify rationing health care	4.1	13.0	26.1	38.7	16.2