COMMUNICATION AS A KEY IN CREATING DIGNIFIED ENCOUNTERS IN UNEXPECTED SUDDEN DEATH BY STROKE

Asa Rejnö 1,2,3, Linda Berg 4
1 Department of medicine, Stroke unit, Skaraborg Hospital Skövde, 2 Department of Health Sciences, University West, Trollhättan, 3 Skaraborg institute, Skövde, Sweden 4 Institute of Health and Care Sciences, Sahlgrenska Academy, University of Gothenburg, Sweden

Background
Communication is present in all encounters in care and of importance to create a caring relation. A good relation between patients, next of kin and health care staff is crucial, not least in times of rapid changes in health and when questions about life and death are at stake such as in palliative care.

Aims
The aim of this study was to illuminate communication and its meaning in unexpected sudden death with stroke as example, as experienced by next of kin and stroke team members.

Methods
The design of the study is a secondary analysis of qualitative data as proposed by Heaton, from a project on unexpected sudden death by stroke. Material from four interview studies from the project with all in all twelve next of kin of patients who had died due to the acute stroke during hospital stay and twenty-seven stroke team members from stroke units were utilized. Data were analysed with qualitative content analysis according to Krippendorf and Baxter.

Results
The analysis reveals communication as the foundation for care and caring. The overarching theme Foundation for dignified encounters in care is built up by six themes illuminating the meaning of communication in unexpected sudden death by stroke; creating relationship, information enabling understanding, giving ground for unanimity, personalizing the patient, preconditioning for decisions and giving and experiencing support.

Conclusions
Communication and its meaning in unexpected sudden death as experienced by next of kin and stroke team members enables dignified encounters in care. Through the next of kin knowledge about the severely ill patient, possibility to preserve and uphold absolute dignity and dignity of identity is given, expressed through respect for the patient’s will and desire and derived through talks between carers and next of kin.

Communication is one key to create dignified encounters in palliative care when unexpected sudden death occurs. It gives ground for unanimity about care and possibility to maintain and uphold dignity in care when acknowledging the next of kin familiarity with the patient. This gives ground for a person centeredness in palliative care despite the patients sever illness.

Figure 1 The six themes building up the overarching theme

Contact: Asa Rejnö
E-mail: asa.rejno@vgregion.se
Stroke unit
Skaraborg Hospital
Skövde
Sweden

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