

A Proposed Patient-Centered Framework to Guide Treatment Decisions in the Frail Elderly

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ABSTRACT

With population ageing worldwide, there is both anecdotal and published evidence that older persons are liable to receive less than standard-of-care treatment on account of their age and apparent frailty. This paper explores the reasons for this and their fallacious underpinnings, which are detrimental to the quality-of-care that older persons receive. We propose a framework to guide decision-making to optimize care, with a paradigm shift in redefining a default towards standard-of-care treatment, guided by evidence-based medicine, and regularly reviewed advance care plans and goals of care conversations.

Keywords: end-of-life care, frailty, advanced care planning, do not resuscitate, dementia