
Withdrawing Life Support for Patients with Brain Injury



The decision to withdraw life support from patients with severe brain injuries is one that cannot be taken lightly. In a study conducted in CMAJ (Canadian Medical Association Journal), critical care physicians were asked about the decision-making process when it comes to withdrawing life-sustaining treatment.

The qualitative interview study was taken by critical care physicians across Canada. It was found that the main considerations of the withdrawal of life support are the patient's previously expressed wishes and those of the family; and also, the location of the injury and its severity. Additionally, the physician's experience, legislation, colleague's opinions and time restrictions were also considered by physicians.

Dr. Alexis Turgeon, critical care physician and researcher at [CHU de Québec](#), described the difficulties physicians faced when trying to match what is best for the patient with the wants of the family/caregiver.

Most hospital deaths for patients with severe brain injuries follow decisions to withdraw life support. As this population were indeed healthy before admittance to the ICU, key considerations as to the long-term prognosis and quality of life need to be considered when making these decisions.

The study also revealed that the decision to withdraw life support from patients with severe brain injury varied between hospitals.

Improvements to the decision-making process regarding life-sustaining treatment include: improving tools to predict patient outcomes; integration of the patient's wishes; improved training for critical care fellowships; standardisation across hospitals; and also, time.

Dr. Turgeon hopes the study will influence policy implicating patients with severe traumatic brain injuries in critical care and help physicians to make care decisions with families in the future.

Source: [CMAJ](#)

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