

BARBARA BUSH OPTED FOR “COMFORT CARE”—BUT WHAT DOES THE TERM MEAN?

Just days before the former first lady Barbara Bush's death, her family announced that she was “not to seek additional medical treatment and will focus on comfort care.” Barbara Bush was 92, and had been suffering from congestive heart failure and chronic obstructive pulmonary disease, when she died at her home in Houston. While many applaud the decision to seek comfort care, it also raised questions about the term and its full implications for patient care.

Ellen Goodman, co-founder of the Conversation Project, says, “It sounds like this forthright, outspoken woman has made her wishes known and the family is standing by her.” Goodman is joined in praising Barbara Bush's care wishes. Dr. Joanne Lynn, director of the program to improve elder care at Altarum Institute, worked with Barbara Bush years ago as Bush helped found the hospice program where Lynn worked. Lynn says that this kind of visible leadership is important. “It makes perfectly good sense at her age,” she says, “with her failing health, that she would say at some point, ‘Life's been good, and while you always want more, it's enough.’”

Some, like Dr. Haider Warraich, a fellow in cardiovascular medicine at Duke University Medical Center and author of *Modern Death*, say the statement creates confusion about the term “Comfort Care,” by suggesting it entails stopping medical treatment. *The Chicago Tribune* picked up on this confusion, illustrating it with the questions: “Is comfort care not medical care? Is it a form of hospice? A form of palliative care?”

Kaiser Health News reports that palliative care experts responded, on social media platforms like Twitter, to this confusion and “vigorously refuted that mischaracterization.” The concern, those like Warraich say, is that the Bush family statement might contribute to a common myth surrounding palliative care—that it denies patients medical help. But that's not the case.

Janet Burda, advanced practice nurse with Palos Community Hospital's Home Health program in Palos Heights, says comfort care is simply a general term for keeping a patient comfortable. Comfort care provides “medical care to help with symptom management,” and helps “relieve anxiety for the caregiver.” Burda works with both palliative and hospice care, both of which are considered comfort care.

In medical circumstances faced by patients like Barbara Bush, the broad term “comfort care” typically means opting not to use a breathing machine or receive CPR. However, patients do continue medical treatment like pain medicine to ease shortness of breath, for instance.

A continued conversation, most agree, is what's necessary to inform patients and families of their options. “By bringing this into the sphere of discussion,” Warraich says, “we can start thinking about comfort and palliation long before they are in the clutches of death.” ([KHN](#), [Chicago Tribune](#), [Forbes](#), [KSRO](#), [Delmarva](#))