

Choices Influenced by Defaults Are More Likely to be Overridden

Evidence from End-of-Life Care Preferences

Jon Cloughesy, University of Southern California

Introduction

- Advance directives (ADs) are documents that allow patients to pre-specify their end-of-life healthcare wishes.
- Prior research has found default options in ADs strongly influence documented care preferences, but do not influence the course of care or clinical outcomes.^{1,2}
- We explore a novel explanation for this discrepancy: defaults reduce confidence in documented preferences, increasing the likelihood that preferences are overridden.

Procedure

- Participants (N = 1706) were randomized to the role of a patient or patient's spouse and were paired together.
- Patients were randomized to complete an AD with or without comfort care defaults (ex: no feeding tube).
- Spouses viewed the patient's completed AD and were informed if the AD had a comfort care default.
- Patients & spouses rated confidence in patient's choices.
- Patients & spouses imagined the patient was seriously ill and would die without life-sustaining treatment but had a reason to extend life (ex: granddaughter's birth).
- Patients & spouses decided to accept or forgo life-sustaining care, potentially overriding the patient's AD.

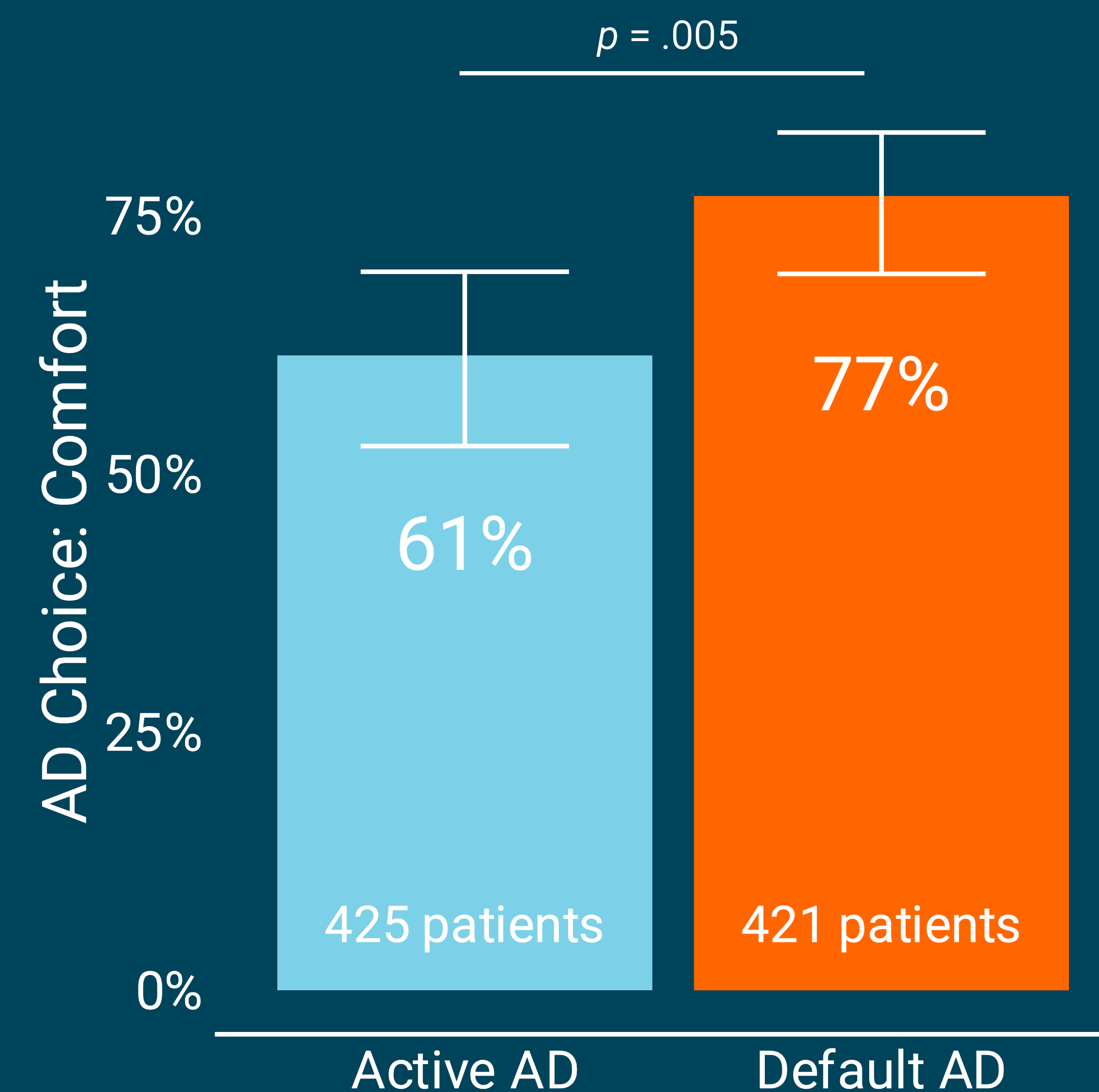
Hypotheses

- Patients completing a comfort default AD (vs. no default) will be more likely to document comfort care preferences.
- Patient preferences will be more likely to be overridden when the patient completes a default AD (vs. no default).
- The effect of defaults on overriding will be mediated by reduced confidence in the documented care preferences.

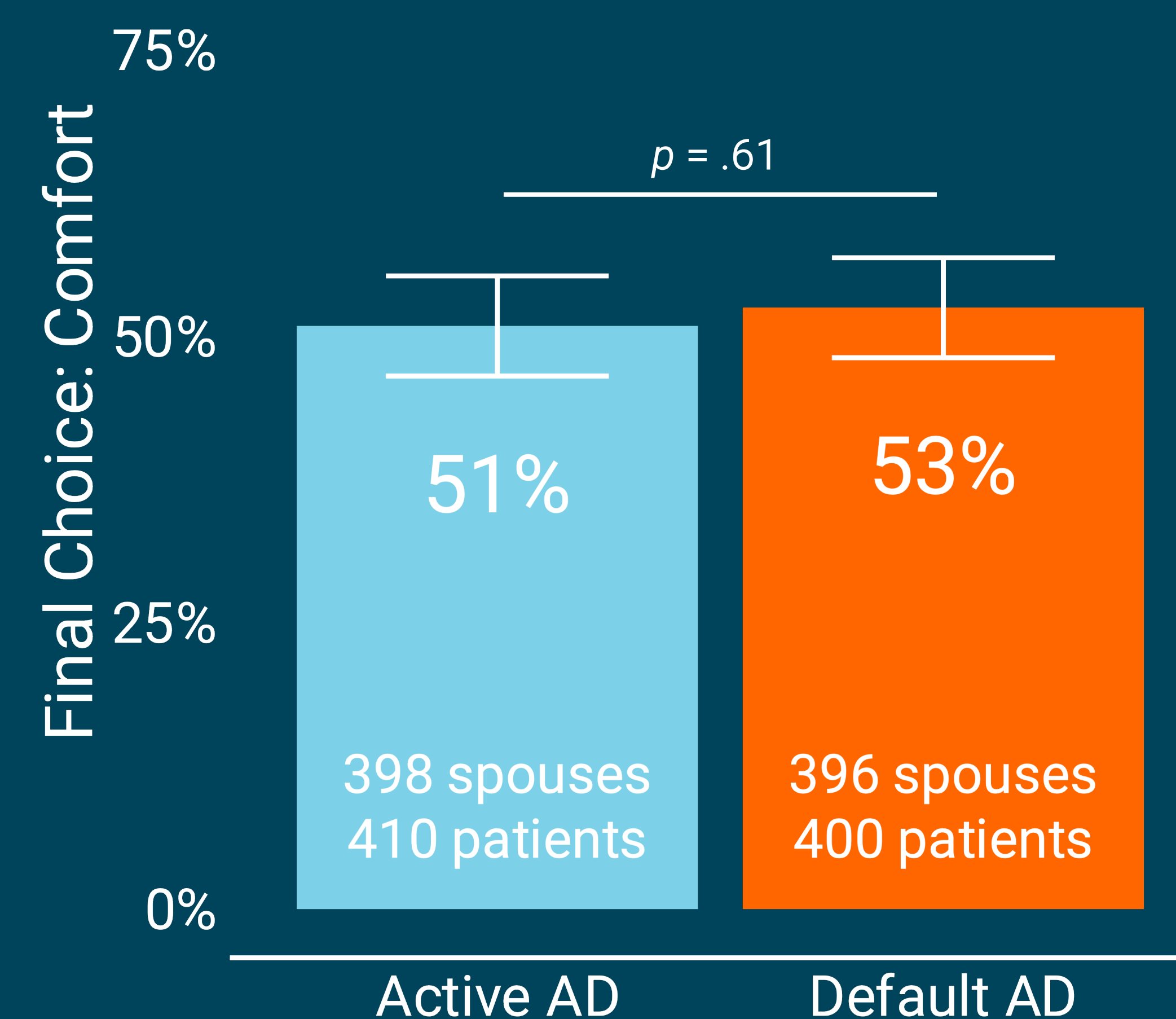
Key Results

- Completing an AD with comfort defaults (vs. no defaults) increased documentation of comfort care preferences: $OR = 2.1$, 95% CI [1.3, 3.5], $p = .005$.
- Completing an AD with comfort defaults (vs. no defaults) increased the likelihood that patient preferences were overridden: $OR = 1.3$, 95% CI [1.1, 1.6], $p = .014$.
- Reduced confidence mediated the effect of defaults on overriding (see Mediation Analysis panel).

Defaults increase the probability that patients prefer comfort care

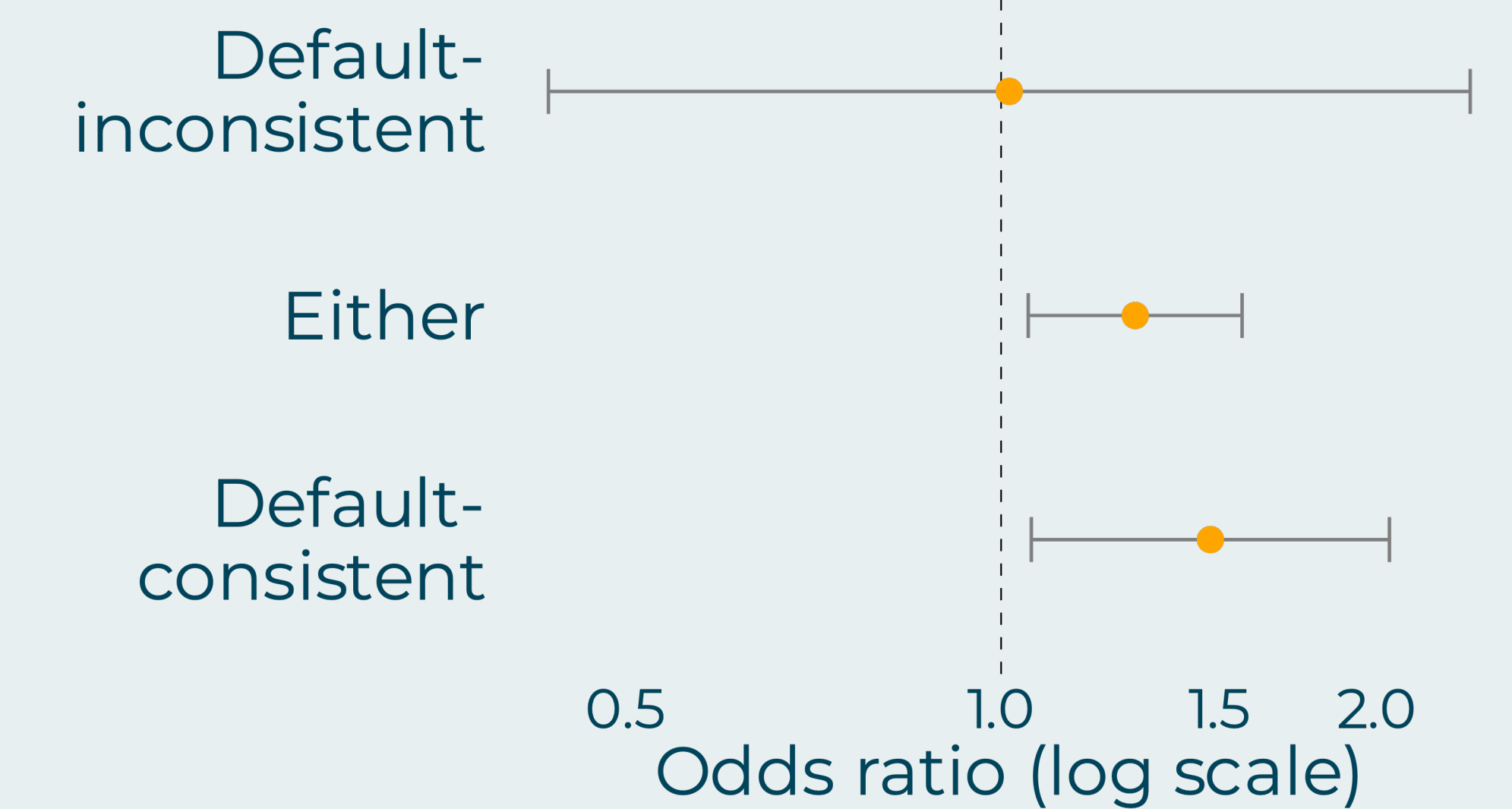


But defaulted choices are overridden more often, erasing the default effect



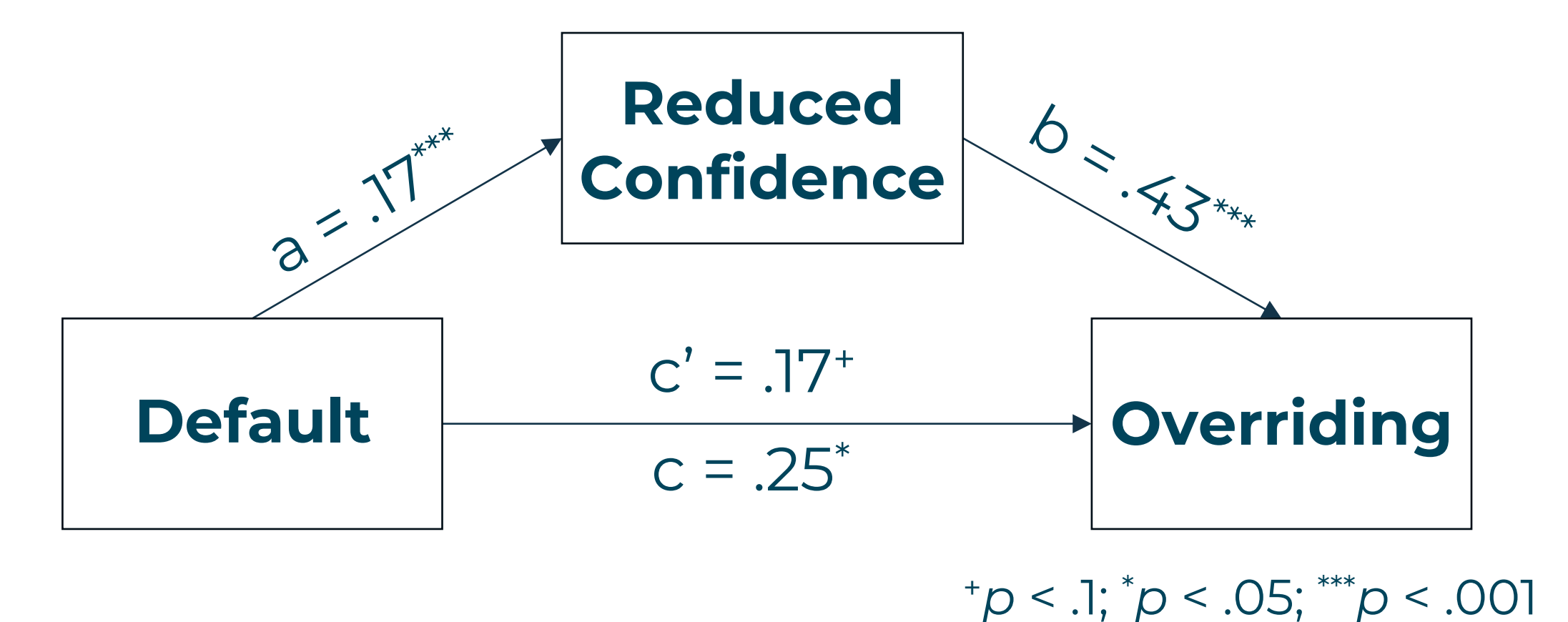
Overriding Preferences

Preferences on a default AD (vs. standard AD) were more likely to be overridden when the patient documented a default-consistent (comfort care) preference ($OR = 1.5$, $p = .02$), but no effect was detected when the patient documented a default-inconsistent (life-sustaining treatment) preference ($OR = 1.0$, $p = .97$).



Mediation Analysis

Completing an AD with comfort defaults reduced confidence in patient preferences, increasing overriding when the choice was revisited: Indirect Effect = .01, 95% CI [.004, .02], $p = .002$



Conclusion

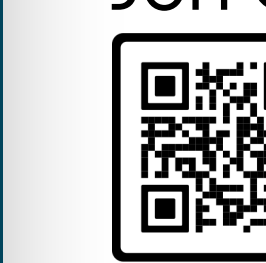
- While defaults influence documented care preferences, increased overriding at the point of care offers a novel explanation as to why clinical outcomes are unaffected by default ADs.
- Assessing the generalizability of these findings to other domains, such as organ donation, is an important next step.
- Future work may seek to increase confidence in preferences stated on defaulted forms.

References

1. Halpern, S. D., Loewenstein, G., Volpp, K. G., Cooney, E., Vranas, K., Quill, C. M., Mckenzie, M. S., Harhay, M. O., Gabler, N. B., Silva, T., Arnold, R., Angus, D. C., & Bryce, C. (2012). **Default Options In Advance Directives Influence How Patients Set Goals For End-Of-Life Care.** *Health Affairs*, 32(2), 408-417.
2. Halpern, S. D., Small, D. S., Troxel, A. B., Cooney, E., Bayes, B., Chowdhury, M., Tomko, H. E., Angus, D. C., Arnold, R. M., Loewenstein, G., Volpp, K. G., White, D. B., & Bryce, C. (2020). **Effect of Default Options in Advance Directives on Hospital-Free Days and Care Choices Among Seriously Ill Patients: A Randomized Clinical Trial.** *JAMA Network Open*, 3(3), e201742.

Authors

Jon Cloughesy^{1,2}, Ada Campagna³, J.W. Lindemans¹, & Dan Ariely¹



¹Duke University
²University of Southern California
³University of California Los Angeles

OSF