Moral Distress as a Result of Futile Care Among ICU Nurses: A Systematic Review

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ABSTRACT

Introduction: Futile care means providing any intervention that improves patients' chances of survival without considering their quality of life. In other words, futile care refers to changes in the clinical condition of patients without affecting their comfort and satisfaction. Providing proper care and comfort to patients is the ultimate goal of the nursing profession. The understanding of futile care among nurses is influenced by various factors, including religious beliefs, personal experiences, individual values, and cultural backgrounds. The4se factors can result in differing reactions to situations involving futile care. One of the remarkable reactions in nurses is moral distress. Therefore, the present study examined the impact of futile care in nursing care and the occurrence of moral distress.

Methods and Materials: This study was conducted using a systematic review method. Evidence published from 2014 to 2024 was analyzed by searching the international databases, including PubMed, Scopus, Web of Science, and Google Scholar, in English with keywords "Futile Care", "Moral Distress", "Nurse", and "intensive care unit". From the 74 studies, 10 original studies were analyzed with inclusion criteria such as free full-text availability and English language.

Results: The results showed a significant relationship between futile care and moral distress, especially for nurses working in critical care units. Moral distress is pain or anger following a person's awareness of an inappropriate moral situation. Moral distress in nurses resulted in decreased job satisfaction, increased turnover, and indifference to patients' requests. On the other hand, futile care led to an increase in the cost of the health care system, in the length of hospitalization for patients, and in the possibility of contracting various hospital infections, such as infections caused by invasive procedures.

Conclusion and Discussion: Moral distress resulting from the provision of futile care by nurses can have detrimental effects on both patients and nurses. This issue is particularly pronounced in many countries, including Iran, where there is a lack of a specific framework governing the care of end-stage patients and the associated dimensions of Do Not Resuscitate orders.

Keywords: Intensive care units, Morals, Nurses

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