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ere is growing interest in enhancing both quality of life and quality of death as medical advancements extend human lifespans e Act on Hospice and Palliative Care and Decisions on Life-Sustaining Treatment for Patients at the End of Life (hereina er referred to as the Act on Decisions on Life-Sustaining Treatment) has been in e ect since February 2018 [2] in order to respect patients' autonomy throughout the dying process and to safeguard their human dignity and values. Patients in one of two categories those with cancer, AIDS, chronic respiratory disease, liver cirrhosis, or who are terminally ill with no chance of fundamental recovery despite active treatment are anticipated to pass away within a few months due to a gradual worsening of symptoms [3]. e goal of this study was to determine the methods of life-sustaining care used by lung disease patients who completed POLSTs. In order to provide them with a comfortable end of life, meaningless medical interventions are restricted and unneeded pain is reduced. Although patients with terminal non-malignant diseases are now included in the scope of hospice and palliative care, some of these patients may live for a long time a er diagnosis, making it challenging to distinguish between the terminal stage and the dying process as their condition alternately gets better and worse [4,5]. While a quick transition to the dying process is prevalent, other patients may not receive the required hospice and palliative care [6]. Moreover, patients and their families may mistake hospice care for a discontinuation of treatment due to misconceptions and misunderstandings of hospice and palliative care for terminal non-malignant diseases, and healthcare professionals may not be well educated. Yet, patients with nonmalignant chronic lung disease have similar physical and psychological requirements, symptom burden, and function deterioration as lung cancer patients [7,8]. e objectives of hospice and palliative care in both kinds of situations include easing physical symptoms for patients

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treatment, including the treatment and progress of patients a er their POLSTs were written, this study aimed to identify the POLST-related characteristics of patients with lung diseases, including both lung cancer and non-malignant lung diseases like COPD. is was done in an e ort to support the implementation of a system for choosing life-sustaining therapy based on the features of patients with lung cancer and non-malignant lung illnesses.



e coronavirus disease 2019 (COVID-19) pandemic may be to blame for the current study's nding of a greater percentage of self-determination than in prior research. During the COVID-19 t(0)10(n)]TX1.31 Tw 9 0 0 9 5371.68421.82Nt applicabldInesses.

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