

Talking with Your Doctor about Your “Bucket List” May Help in Choosing Care Options

Do you have a “bucket list”? If so, did you know that it might be helpful to share it with your doctor?

Many people have a bucket list, which is simply a list of things they want to do before they die. Named after the phrase, “kick the bucket,” bucket lists have become increasingly popular in the United States.

Researchers in California created an online survey to study the bucket lists of Americans. In their study, published in the *Journal of Palliative Medicine*, they list common bucket list items and discuss ways in which talking to your doctor about your list could help you choose care that best fits your goals.

Out of more than 3,000 people who participated in the survey, about 91% said they had a bucket list. The researchers found that the following six common themes appear in people’s lists:

- 1. TRAVEL.** 79% of people who had a bucket list mentioned a desire to travel, especially visiting a dream destination.
- 2. ACHIEVING A PERSONAL GOAL.** This was the second most common goal, with 78% of people listing things such as running a marathon or writing a book.
- 3. ACHIEVING A LIFE MILESTONE.** Events such as becoming a grandparent or reaching a wedding anniversary was next most popular, with 51% identifying this type of goal.
- 4. FRIENDS AND FAMILY.** 17% of participants mentioned that spending quality time with friends and family was important to them.
- 5. FINANCIAL STABILITY.** Various types of financial stability, such as paying off a mortgage, were priorities for 16% of those surveyed.
- 6. DARING ACTIVITIES.** Adventures such as skydiving or hang-gliding were on the bucket list for 15% of survey participants.

The researchers explain that items included in a bucket list can be short- or long-term goals, and are likely to change throughout life. Bucket lists can also be influenced by certain characteristics. For example, people who say religion or spirituality is important to them are more likely to have a bucket



list, and younger people are more likely to include more “daring and risky” goals in their lists.

Benefits of Discussing Bucket Lists with Doctors

“We propose the use of the bucket list to help patients identify what matters most to them,” write the authors. They encourage doctors and patients to talk about the patient’s bucket list together.

Discussing a bucket list can help doctors understand their patient’s values and priorities in life, which helps them better inform patients about the potential impact of each care option on achieving their life goals. Examples include:

- Doctors could give diet and exercise advice to a healthy patient whose goal is to run a marathon.
- Someone who wishes to dance at his granddaughter’s wedding can talk about the best timing for a knee replacement.
- A seriously ill person can discuss the side effects of treatment, and may decide to delay or forego treatment in order to fulfill a bucket list wish, like attending an upcoming family reunion.

“[H]aving a bucket list is an expression of hope and future orientation,” write the study authors. If you have a bucket list, consider sharing it with your doctor to start talking about therapies and options that may help you achieve your goals.

Grieving Before a Loved One Dies Is Normal, Experts Explain

In an article published in *Kaiser Health News* titled, “The Long Goodbye,” grief experts talk about how normal it is for feelings of loss and sadness to happen as someone with a serious illness loses independence, even though we usually talk about grief as something that happens after a loved one dies.

Grief and sadness “are typically acknowledged only after a loved one’s death, when formal rituals signifying a person’s passing — the wake, the funeral, the shiva — begin,” writes Judith Graham, author of the article. However, seriously ill people and their families can experience these emotions as they grieve the loss of someone’s independence, the future they may have imagined together, and even memories, in the case of patients with dementia.

Grief experts offer tips for coping with this type of gradual grieving process, which is called “anticipatory loss.”

Acknowledge Your Feelings

Even though people don’t usually talk about it, feelings of loss and sadness when a loved one has a serious illness are absolutely normal, according to the director of grief and loss services at a Colorado hospice. “Grief starts the moment someone with a serious illness receives the diagnosis,” she says, and more grief can surface each time someone loses an ability; for example, when an older adult stops being able to use stairs or drive.

Talk Openly

“[Y]ou’re better off trying to get through whatever you’re facing together,” one psychiatry professor states. From his experiences working with couples dealing with multiple sclerosis, he’s found that family members often want to talk about the same things, but don’t bring them up. It’s “a tremendous relief” when people realize others wish to talk about the same issues. People facing a serious illness often think about what the future holds, and they can feel isolated

from family members if everyone avoids the topics of frailty or illness. It’s healthier for families to be open with each other and grieve together.

Communicate Sensitive

A psychologist has similar advice about open communication. She says it’s best for each person to share what they are feeling, without worrying about protecting others from what they’re going through. Holding back for fear of hurting someone can lead to more isolation. It’s possible to communicate sensitively while still being honest about complicated feelings.

She offers an example of sensitive communication with someone who has dementia. A family member might say to their loved one, “Sometimes you might see a look crossing my face and think that I’m disappointed. It’s not that I’m upset with you. It’s that I’m sad that there are things that happened in our past that we don’t remember together.”

Lean In

While serious illness can make some people cherish every moment with their loved one even more, it’s also common for people to feel uncomfortable and start to distance themselves from the sick person. It can help if you choose to lean in instead, enjoying the time you have together. Connection, especially on an emotional level, eases the pain of grief.

Seek Support

Experts recommend you surround yourself with people who will support you so you don’t have to confront grief alone. A supportive companion can be anyone — a family member, friend, or fellow member of a support group.

To read more insights into ways to deal with anticipatory loss due to a loved one’s serious illness, visit <https://khn.org/news/the-long-goodbye-coping-with-sadness-and-grief-before-a-loved-one-dies/>.



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