Board of examiners

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Prof. Prof. Dr. Dirk Devroey, Chair
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Prof. Dr. Luc Deliens
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Prof. Dr. Joachim Cohen
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Vrije Universiteit Brussel (VUB) & Ghent University (Co-promotor VUB)

Prof. Dr. Robert Vander Stichele
Heymans Institute of Pharmacology
Ghent University (Co-promotor UGent)

PhD in Social Health Sciences
2014-2015

JOINT PHD VUB & Ghent University

INVITATION to the Public defence of

Thijs REYNIERS

To obtain the academic degree of ‘DOCTOR IN SOCIAL HEALTH SCIENCES’

Hospital admissions at the end of life.
Reasons, appropriateness and avoidability.

Wednesday 3 June 2015
Auditorium Brouwer, 17:00
Faculty of Medicine and Pharmacy, Laarbeeklaan 103, 1090 Brussel

How to reach the campus Jette:
http://www.vub.ac.be/english/infoabout/campuses
The acute hospital setting consistently remains a frequent place of death in most high-income countries; in Belgium nearly half of all deaths occur in the hospital setting. To reduce the number of hospital deaths there has been an increased interest in reducing the number of end-of-life hospital admissions. The present dissertation aims to shed some light on the complexity of the reasons for and circumstances leading to such admissions and to provide a more thorough understanding about the appropriateness and avoidability of these admissions.

In a first part, the proportion of older persons with a dementia-related disease who die in hospital in Belgium is examined, using death certificate data. In a second part family physicians’ perspectives are explored concerning their role in preventing and guiding end-of-life hospital admissions and the difficulties they experience, using a focus group methodology. In a third part, the reasons, appropriateness and avoidability of end-of-life hospital admissions are explored, using a mixed method approach: focus groups among family physicians and nurses from different care settings (home care, care home and hospital); interviews with family carers whose relative had died in hospital; and surveys among family physicians whose patients had died non-suddenly in the acute hospital setting of a university hospital.

Although the acute hospital setting is considered not to be an ideal setting for end-of-life care or as a place of death, most terminal hospital admissions might be considered appropriate or unavoidable, either due to a medical complication (e.g. pneumonia), the patients’ preferences or because of an inadequate care setting. Further implications for policy and practice that could reduce the number of end-of-life hospital admissions are provided in this dissertation.

Curriculum Vitae

Thijs Reyniers was born on the 12th of February 1987 in Turnhout, Belgium. He studied Sociology (major in Sociology of Health) at Ghent University and obtained his Master’s degree in 2009. One year after, he finished the Teacher Program at Ghent University. After that Thijs quickly found his way back to science and started working as a junior researcher at the End-of-Life Care Research Group, Vrije Universiteit Brussel (VUB) & Ghent University. Supported by a grant from the Flemish government agency for Innovation by Science and Technology (IWT), Thijs conducted research on end-of-life hospital admissions, supervised by Prof. Dr. Luc Deliens and Prof. Dr. Dirk Houttekier, and co-supervised by Prof. Dr. Joachim Cohen and Prof. Dr. Robert Vander Stichele. Thijs Reyniers now works at the Institute of Tropical Medicine in Antwerp, as a social science coordinator on a project that focuses on HIV prevention among MSM.