

Jennifer L. McAdam
Judith E. Nelson
Kathleen A. Puntillo

Regret

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J. L. McAdam
Samuel Merritt University, 3100 Telegraph Ave, Oakland,
CA 94609, USA

J. E. Nelson
Division of Pulmonary, Critical Care and Sleep Medicine,
Mount Sinai School of Medicine, New York, NY 10029, USA

K. A. Puntillo (✉)
University of California, San Francisco, San Francisco,
CA 94143-0610, USA
e-mail: Kathleen.puntillo@nursing.ucsf.edu
Tel.: +415-476-1844
Fax: +415-476-8899

We all know what it means, we all experience it, and we all know how it feels. But what is it about death and dying that seems to bring feelings of regret in people? What is it that ICU family members regret? What do we as ICU clinicians regret? Do we have our own regrets when we lose someone we love?

When we asked ICU family members in focus groups how they would describe good palliative care, we realized that some talked about regrets when thinking back to the deaths of their loved ones in ICU. One wife regretted not saying what she felt needed to be said to her husband before he died.

...what I feel is, to this day, I cannot get over that I was not able to talk to my husband before he actually was not conscious anymore. That, it just comes

to me over and over, what is it that I would have said to him, kiss him, you know, and make him feel that I was kissing him. See his eyes open before you know he went to sleep for good. It's, it just stays with me, what would I have said to him. Because that would have been our last time together.... I left that morning, saying goodbye to him, and him just saying bye to me, and then I come back at night and he's out.

An ICU is not the place most people want to die. So, regrets about ICU deaths are not surprising. One family member's regret: not staying and watching over her mother while she was in the ICU and feeling a loss of control.

...If I'd got to stay with her, she may be here today... and most of this happened at night, when you're not allowed in there. You can't get in there. After eleven o'clock, you can't get in there. They won't let you in. And I don't feel like that's right. I can understand not being in there twenty four seven, but, also, I feel like, if they're not watching them, you've got to be there to watch them. And I feel like she might still be here today if the accidents, and the machinery, and... just, a lot of things just shouldn't have happened. Should not have happened.

In these words, one can hear not only the regret, but perhaps even guilt about failing to protect the loved one.

In our clinical practices, we try to do the best possible for our patients and families. We often feel good about what we do, and do not look back, or we remember with gratification and a sense of purpose fulfilled. However, there are days that we do not forget; some that we would like to do over; different choices that we would have made. A clinical nurse specialist in one ICU told us about one of those days for her:

It was a busy day in the ICU, the overhead page to the nurse at bed 16 stated, "you have a call on line

1". I had finished rounds and was at the podium outside room 16 and noticed the nurse was busy performing a care task in the room; so I answered the phone for him. The patient, a young Hispanic man, was in the ICU for close monitoring as he had an aortic aneurysm. When I answered the phone, the patient's wife identified herself and asked to speak to her husband. Knowing that he was amidst a care task with his nurse, I explained this and asked if she could call back in 15 to 30 minutes. She would never speak to her husband again. During that time his aneurysm ruptured, he arrested, and despite heroic efforts we could not resuscitate this young man. I felt regret. Why didn't I interrupt the minor care task and ask the patient or his nurse if he wanted to take the call? I assumed he would be able to take the call in a short time. I assisted his nurse with post-mortem care, something I do not routinely do. I wanted to tell him that I was sorry. I wish I could have told his wife that I was sorry. This happened many years ago, yet I remember it vividly.

As ICU clinicians, we help prepare family members for the potential loss of their loved one. We frequently deal with dying and death, sometimes on a daily basis. But just because we have that experience and know what to expect does not mean we do not have our own regrets that find their way into our personal lives as well. One of us worked as an ICU staff nurse while pursuing her master's degree in nursing. On looking back at the death of her mother, she shared this story:

When I was finishing my master's degree in nursing, my mom, who lived in another state, was dying of

colon cancer. As an ICU nurse, I knew stage 4 'wasn't good', I knew she wouldn't be around forever; yet, I couldn't quite accept that she was dying. Denial is powerful, and I had a lot of it. She died about a month before I graduated. My biggest regret—I thought there were many—but my biggest regret to this day, was that I wasn't there as much as I should have been during the last 3–6 months of her life. To this day, I wish I had been. I should have been there. I know it wouldn't have changed the outcome, but for me, I might have had 'less regret'.

No regrets

Regret is powerful. We are not sure anyone is immune from experiencing it, even those of us who study end of life and work in the ICU. Long after, the thoughts reverberate—was it enough, or too much? Whether you felt you should have "said more" before your husband died; whether you should have "stayed and watched over" your mother before she died; whether you should have allowed that patient to speak to his wife then and there; whether you should have "been there" for your mom... well it turns out we all have our regrets. Maybe if we understand and learn from that, we can help families forgive themselves, and we may become more forgiving of ourselves. Maybe we will even have less regret.

Conflicts of interest On behalf of all authors, the corresponding author states that there is no conflict of interest.