

Information to support decision making

Information for patients, families and the public

The Faculty of Intensive Care Medicine have produced [a guide to best practice and decision-making in critical care at the end of life](#), for patients, relatives and the public on care at the end of life.

Key questions to consider are:

- How will critical care treatments help the person in the short and long term?
- Could critical care treatments offer a quality of life that is acceptable to the person?
- Could critical care treatments help achieve a patient's goals for a good life?
- Are there non-critical-care treatments that may help the person and be more comfortable for them?

ICNARC data on outcomes for pneumonia

ICNARC (the Intensive Care National Audit and Research Centre) has mortality data at discharge from the critical care unit and at ultimate discharge from acute hospital (excluding readmissions of the same patient within the same acute hospital stay) for different age groups.

Note: the data below is for all-cause pneumonia, not COVID-19.

Overall mortality data

Age (years)	Critical care unit mortality	Acute hospital mortality
16-49	1,858/16,700 (11.1%)	2,244/15,305 (14.7%)
50-59	2,527/13,075 (19.3%)	3,090/11,913 (25.9%)
60-69	4,516/17,835 (25.3%)	5,471/16,257 (33.7%)
70-79	6,052/19,371 (31.2%)	7,447/17,567 (42.4%)
80+	3,736/10,183 (36.7%)	4,858/9,466 (51.3%)
All ages	18,689/77,164 (24.2%)	23,110/70,508 (32.8%)

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Data for patients with cardiovascular co-morbidity

Age (years)	Critical care unit mortality - with cardiovascular comorbidity	Critical care unit mortality - without cardiovascular comorbidity	Acute hospital mortality - with cardiovascular comorbidity	Acute hospital mortality - without cardiovascular comorbidity
16-49	25/135 (18.5%)	1,829/16,503 (11.1%)	35/128 (27.3%)	2,204/15,118 (14.6%)
50-59	58/170 (34.1%)	2,459/12,871 (19.1%)	63/157 (40.1%)	3,017/11,722 (25.7%)
60-69	112/335 (33.4%)	4,395/17,463 (25.2%)	133/307 (43.3%)	5,329/15,914 (33.5%)
70-79	195/486 (40.1%)	5,842/18,844 (31.0%)	241/430 (56.0%)	7,189/17,098 (42.0%)
80+	148/338 (43.8%)	3,575/9,822 (36.4%)	195/312 (62.5%)	4,648/9,131 (50.9%)
All ages	538/1,464 (36.7%)	18,100/75,503 (24.0%)	667/1,334 (50.0%)	22,387/68,983 (32.5%)
Definition:	Severe comorbidities must have been present in the 6 months prior to admission to the critical care unit and documented in the patient record either at or prior to admission to the critical care unit.			
	Cardiovascular comorbidity is defined as fatigue, claudication, dyspnoea or angina at rest due to myocardial or peripheral vascular disease (New York Heart Association functional class IV).			
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Data for patients with respiratory co-morbidity

Age (years)	Critical care unit mortality - with respiratory comorbidity	Critical care unit mortality - without respiratory comorbidity	Acute hospital mortality - with respiratory comorbidity	Acute hospital mortality - without respiratory comorbidity
16-49	121/796 (15.2%)	1,733/15,842 (10.9%)	148/745 (19.9%)	2,091/14,501 (14.4%)
50-59	187/668 (28.0%)	2,330/12,373 (18.8%)	219/635 (34.5%)	2,861/11,244 (25.4%)
60-69	382/1,171 (32.6%)	4,125/16,627 (24.8%)	464/1,109 (41.8%)	4,998/15,112 (33.1%)
70-79	464/1,158 (40.1%)	5,573/18,172 (30.7%)	554/1,087 (51.0%)	6,876/16,441 (41.8%)
80+	173/415 (41.7%)	3,550/9,745 (36.4%)	221/391 (56.5%)	4,622/9,052 (51.1%)
All ages	1,327/4,208 (31.5%)	17,311/72,759 (23.8%)	1,606/3,967 (40.5%)	21,448/66,350 (32.3%)
Definition:	Severe comorbidities must have been present in the 6 months prior to admission to the critical care unit and documented in the patient record either at or prior to admission to the critical care unit.			
	Respiratory comorbidity is defined as permanent shortness of breath with light activity due to pulmonary disease or use of home ventilation (excluding CPAP for sleep apnoea).			
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