

October 2015 Health Notes by Evelyn Ames

Palliative Care: What Does It Mean?

The World Health Organization defines “Palliative Care” as being “an approach that improves the quality of life of patients and their families facing the problem associated with life-threatening illness, through the prevention and relief of suffering by means of early identification and impeccable assessment and treatment of pain and other problems, physical, psychosocial and spiritual. Palliative care:

- provides relief from pain and other distressing symptoms;
- affirms life and regards dying as a normal process;
- intends neither to hasten or postpone death;
- integrates the psychological and spiritual aspects of patient care;
- offers a support system to help patients live as actively as possible until death;
- offers a support system to help the family cope during the patient’s illness and in their own bereavement;
- uses a team approach to address the needs of patients and their families, including bereavement counselling, if indicated;
- will enhance quality of life, and may also positively influence the course of illness;
- is applicable early in the course of illness, in conjunction with other therapies that are intended to prolong life, such as chemotherapy or radiation therapy, and includes those investigations needed to better understand and manage distressing clinical complications.”

Palliative care can be administered in the home but it is most common for a patient to receive palliative care in an institution such as a hospital, extended care facility, or nursing home that is associated with a palliative care team.

The Bellingham Herald (April, 2015) printed a special report about the palliative care team at St. Joseph Medical Center in Bellingham. The team consists of Catherine-Bree Johnston (medical doctor), a social worker, chaplain, nurse, and two other physicians. These specialists “work directly on patient concerns about quality-of-life issues, helping them make decisions in the midst of complex medical treatments with uncertain outcomes.” Not only are a patient’s medical needs met but also the emotional, spiritual, social and other needs are considered. The patient’s primary care and specialty doctors are included in the overall care. “We try to help patients determine what is most important to that person and their family,” Johnston says. “When people have a serious illness, it’s not always clear what is the right thing to do.” Physicians on a palliative care team coordinate with a patient’s current doctors to make sure they are in sync, especially if they are treating multiple illnesses. Practical and legal concerns are addressed if a person’s illness should become debilitating or require full-time nursing care.

In summation, palliative care is a multidisciplinary approach to specialized medical care for people with serious illnesses focusing on providing patients relief from symptoms, pain, physical stress, and mental stress of a serious illness. The goal: improve quality of life for both the patient and family. The kind of care depends on what one needs. Palliative care can help reduce pain or treatment side effects, may help a person and one’s loved ones better understand the illness, talk more openly about feelings, or decide what treatment is wanted or not wanted. It also helps with communication among doctors, nurses, and loved ones.

Resources:

<http://www.who.int/cancer/palliative/definition/en/>

<http://www.bellinghamherald.com/news/special-reports/article22288281.html>

<http://www.bellinghamherald.com/news/special-reports/article22288281.html#storylink=cpy>

<http://www.webmd.com/palliative-care/palliative-care-topic-overview>

<http://www.caregiverslibrary.org/caregivers-resources/grp-end-of-life-issues/hsgrp-hospice/hospice-vs-palliative-care-article.aspx>

<http://www.peacehealth.org/southwest/services/hospice/Pages/bridges-palliative-care.aspx>