



Making healthcare humane

Integration of
palliative care with
all healthcare

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'The road not taken' by any, except Dame Cicely Saunders

Two roads diverged in a
wood, and I-

I took the one less
traveled by,

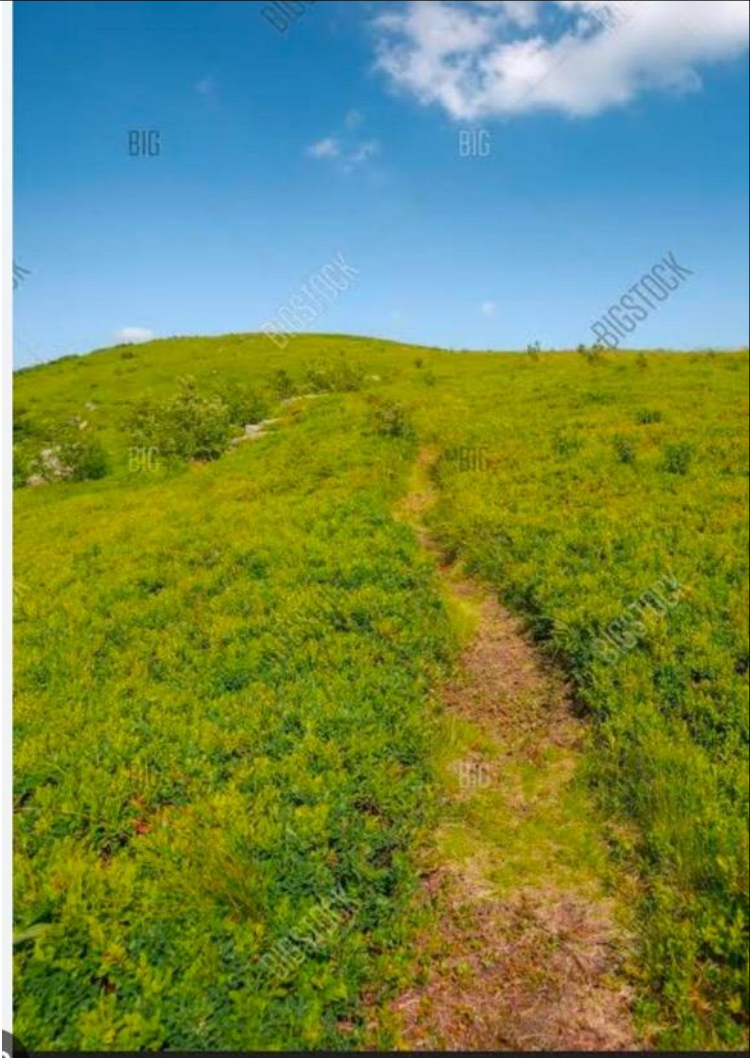
And that has made all
the difference.

Robert Frost



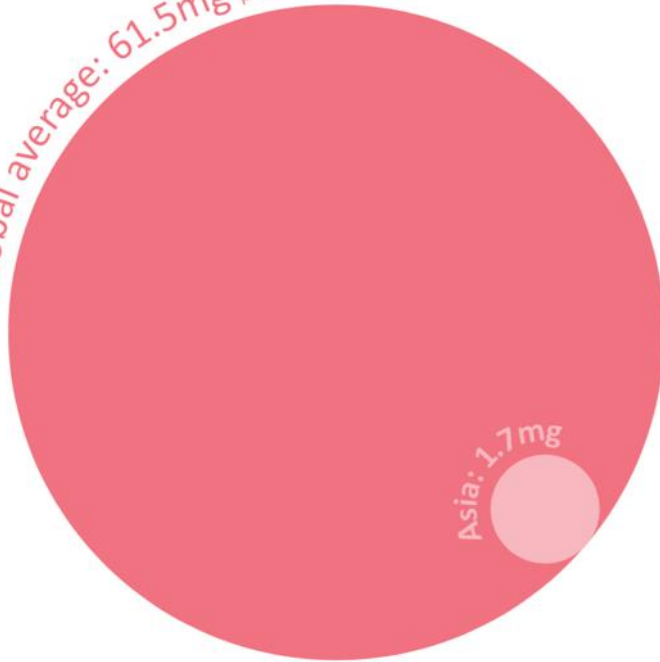


We owe it to her memory...
....not just to follow her path
blindly, but to keep looking
for unbeaten tracks.





Global average: 61.5mg per capita



75% of the world

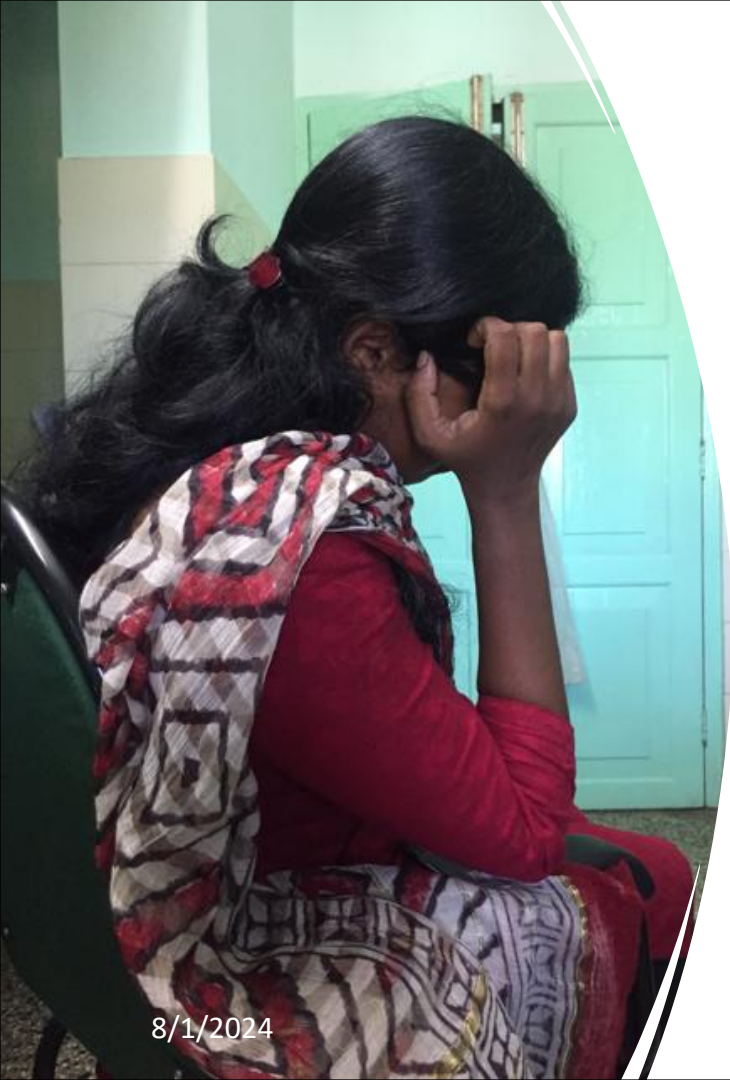
remain without access to proper pain relief treatment.

Asia's morphine per capita consumption

36x less than the global average



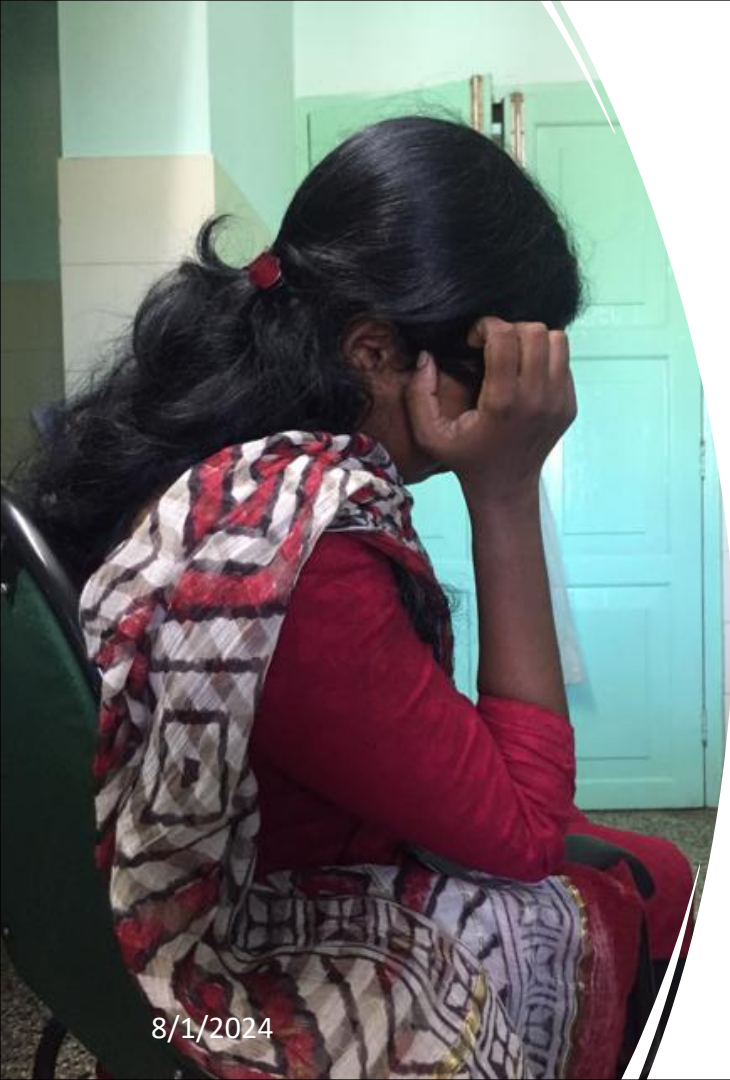
International Drug Policy Consortium - 10 Years of Drug Policy in Asia: How far have we come, 2019



Single parent of 2 teenage girls:

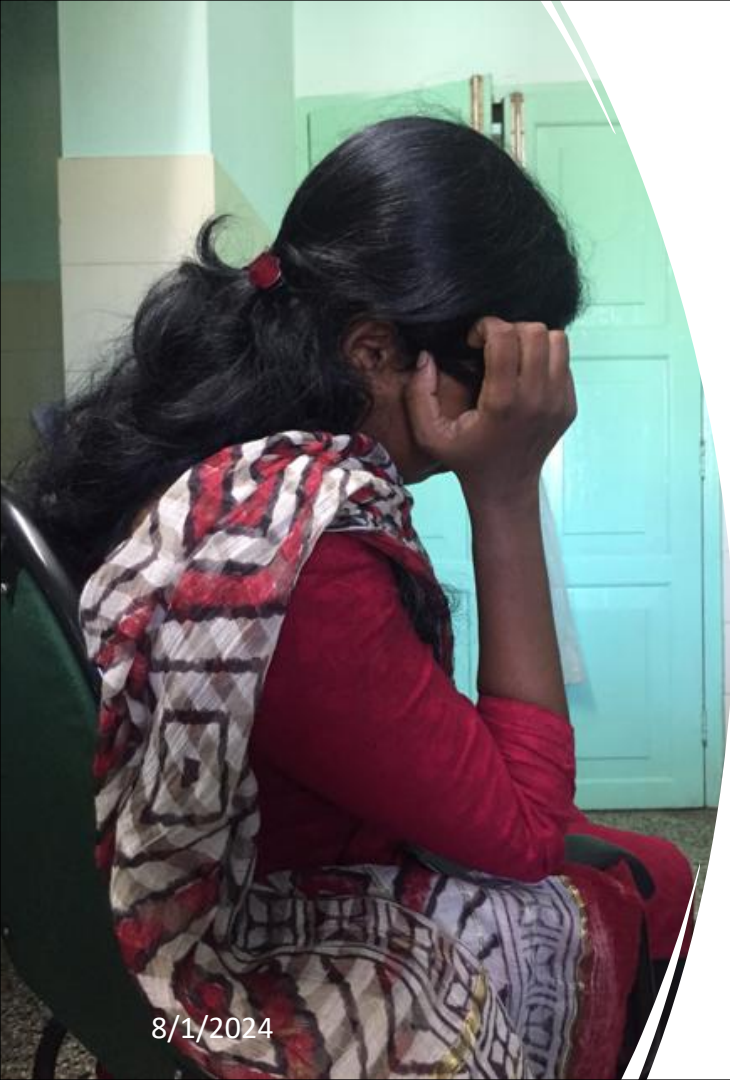
Came with bleeding PV, claiming to have cancer, but lost case-records.

Turned out to have incomplete abortion.



Single parent of 2 teenage girls:

Had bought poison to feed her daughters and herself; but could not bring herself to kill her own children.



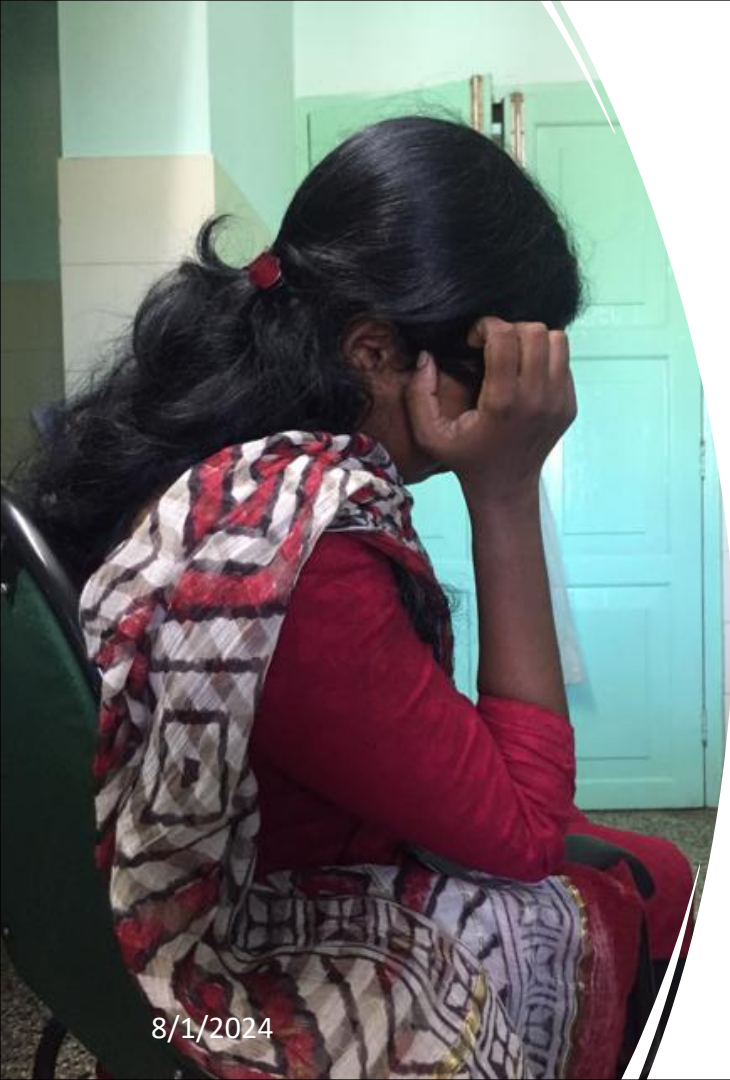
A doctor's duty:

<https://www.icmr.nic.in/content/definition-terms-used-limitation-treatment-and-providing-palliative-care-end-life%20and%20providing%20palliative%20care%20at%20end%20of%20life.pdf>

“To mitigate suffering.

To cure sometimes,
to relieve often
and to comfort always.

There are no exceptions to this principle”.



Our management:

Facilitated transfer to neighboring town for evacuation of uterus accompanied by a volunteer.



Our preventive measure: Support for children's education



8/1/2024

www.palliumindia.org

Woman, 38, Diabetic
since age of 4. Infected
leg; advised AK
amputation.
Blind for 4 years.
Abandoned by husband.
Lives with her son, 12.



Limb salvaged by a
diabetologist.

Eye surgery - saw her
son after 4 years.

Lives in a rented
house.



Ashla Rani, trustee of Pallium India

"I am disabled only when a sidewalk, a building or a restaurant is not accessible to my wheelchair. I am disabled only when I am not allowed to enter the world around me."

[@AshlaRani](#) [@palliumindia](#)



'If I had a choice, I would want walk again. But it is equally true that my life in these last 10 years has been more meaningful than in the 27 years when I could walk".

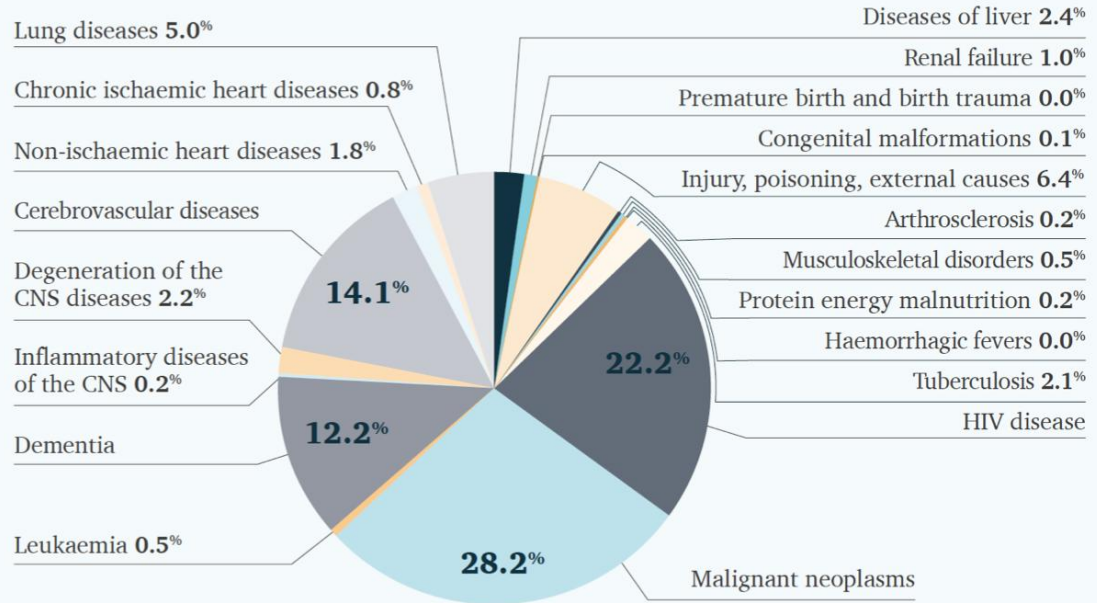
@AshlaRani @PalliumIndia



Conditions necessitating palliative care

Figure 5
Worldwide need for palliative care for adults by disease groups (20+ years 2017)

N = 52,883,093 adults



Error of commission 1: Inappropriate end-of-life care.

The poor die in misery of neglect;
the middle class die in
misery of ignorance;
the rich die in misery on ventilators.
No one gets a pain-free and dignified
death.

Dr Sankha Mitra

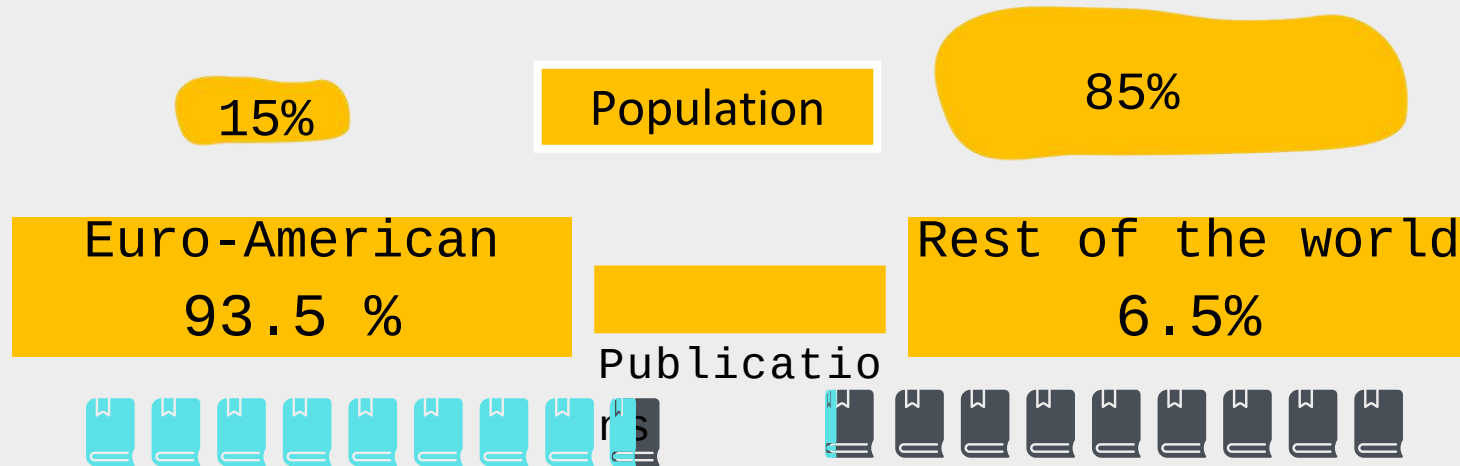


Global error of commission 2: Catastrophic Health Expenditure

High income countries	84.6 million
Low-income countries	54.5 million
Low-middle income countries	423.1 million
High-middle income countries	433.9 million

<https://databank.worldbank.org/metadataglossary/health-nutrition-and-population-statistics/series/SH.UHC.OOPC.10.TO>

Research in palliative care



Siribaddana S, Patel V. Under-representation of developing countries in the research literature: ethical issues arising from a survey of five leading medical journals. BMC Medical Ethics. 2004; 5.

WHO definition: palliative care?

Palliative care is an approach that improves the quality of life of patients and their families facing the problems 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.

Sepúlveda C, Marlin A, Yoshida T, Ullrich A. Palliative Care: The World Health Organization's Global Perspective. *J Pain and Symptom Manage* 2002; 24(2): 91-96

Nurse in Uganda about woman in difficult labour.

My supervisor told me not to see her; that she is not a palliative care patient. But she is one of my people; I cannot walk away when she is suffering.





Health

Health is not only absence of disease or infirmity.

It is complete physical, social, and mental well-being.

<http://www.who.int/about/mission/en/>

Palliative care is mitigation of serious health-related suffering (SHS)

The seminal report – Lancet Commission on Access to Palliative Care 2017- introduced a new metric, serious health-related suffering (SHS)—to uncover the epidemic of suffering...”

[http://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(17\)32513-8/fulltext](http://www.thelancet.com/journals/lancet/article/PIIS0140-6736(17)32513-8/fulltext)

“Medicine can never be the same again”. (Horton R)

World Health Assembly 67, 2014

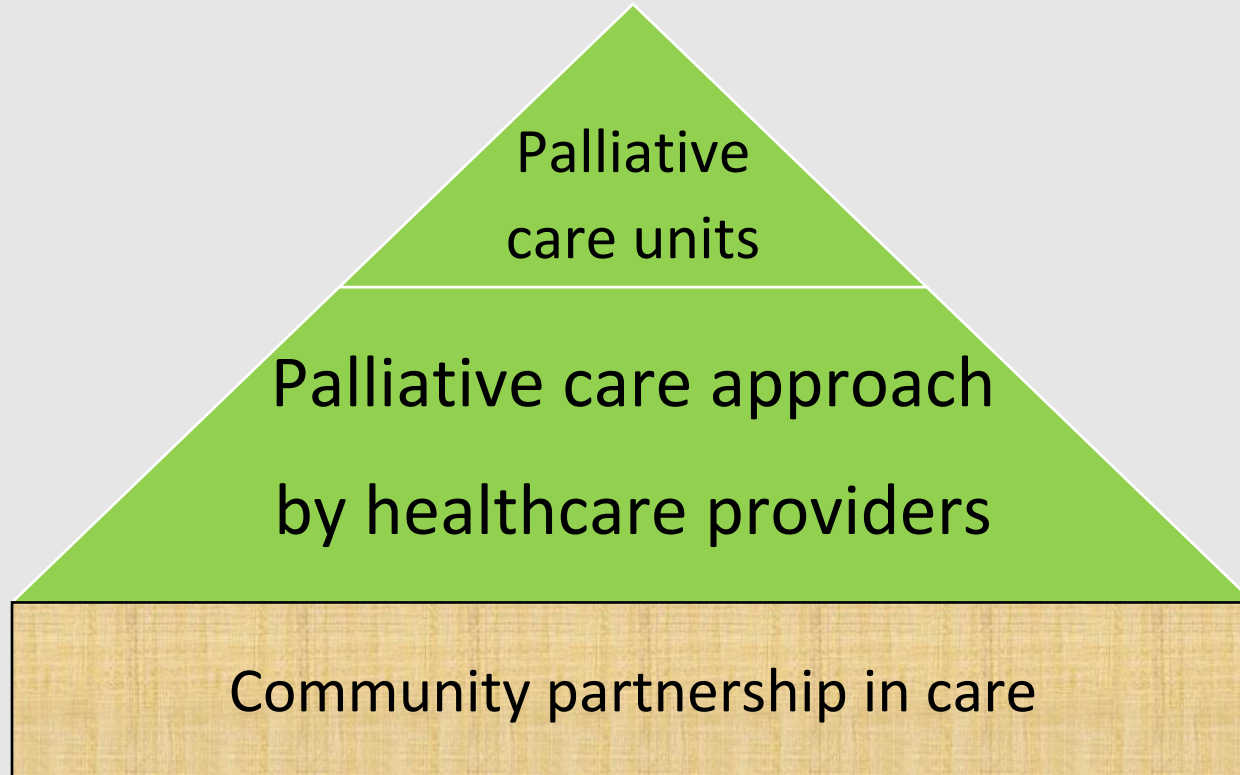
Integrate palliative care into all healthcare
at all levels [primary, secondary, tertiary]
across the continuum of the illness
(from the diagnosis to the end).



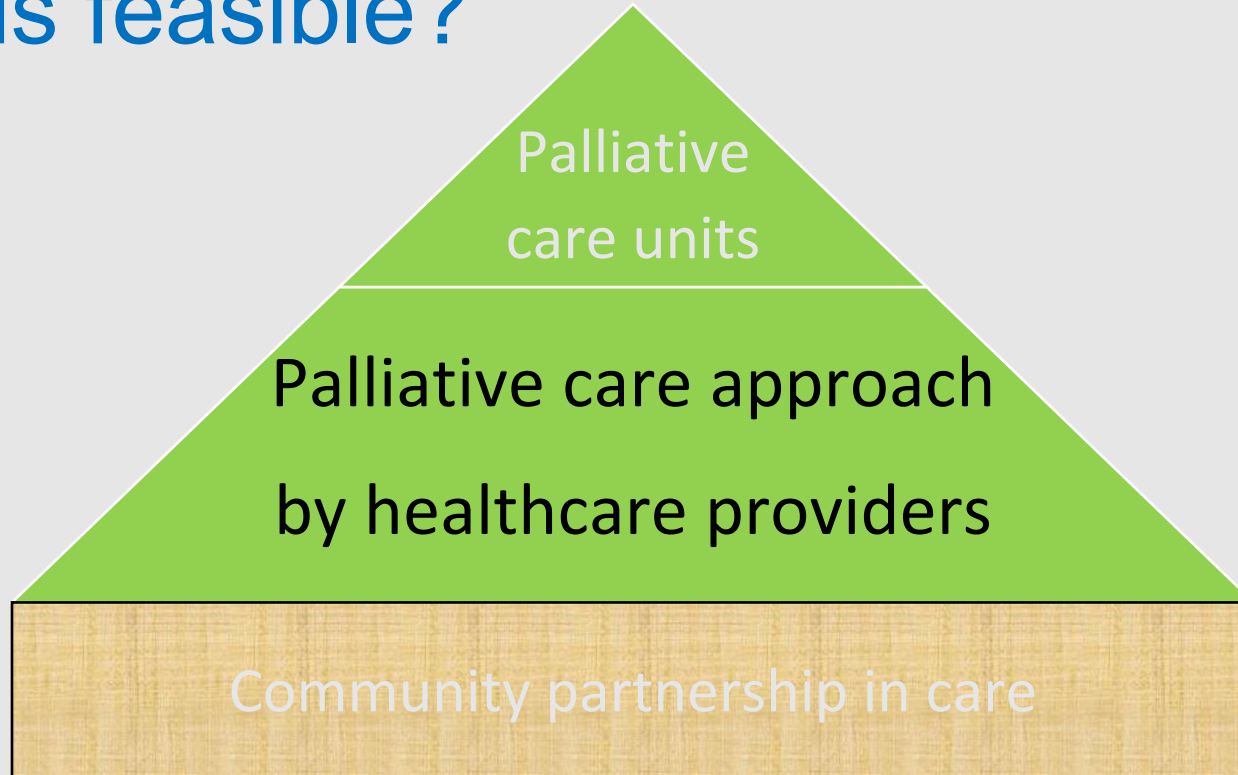
WHA 67.19. Strengthening palliative care as a component comprehensive care throughout the life course. 67th world health assembly, 2014.

http://apps.who.int/gb/ebwha/pdf_files/WHA67/A67_R19-en.pdf





Is this feasible?



Pallium India's D,E,F strategy

- Demonstrate
- Educate
- Facilitate

Pallium India's D,E,F strategy

- Demonstrate – quality care delivery
- Educate – professionals and the public
- Facilitate – policies, programs

We collaborate

- Demonstrate – quality care delivery
- Educate – professionals and the public
- Facilitate – policies, programs

Healthcare – the ‘how’ of it.

- Alma Ata declaration 1978:

“People have a right and duty to participate individually and collectively in the planning and implementation of their health care.”



- Astana declaration 2018:

“Health for all has to be health **with** all”.

“Include people in designing and controlling health systems”.



Community participation - advantages

- Adherence to treatment
- Balanced prevention, promotion, cure, rehab & palliation
- Integration of multiple sectors like education, agriculture, transport, commerce, religion, housing, trade.





OPEN THE
HEALTHCARE
DOOR

Break free of shackles of
self-colonization by guidelines.



Address all health-related suffering



Address all health-
related suffering

It is not easy?
WHY DOES IT HAVE
TO BE EASY?



My main messages:



Address all Serious health-related suffering



Demonstrate, Educate, Facilitate



Integrate palliative care into all healthcare



Open the healthcare door to the community

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