

KEMENTERIAN KESIHATAN MALAYSIA

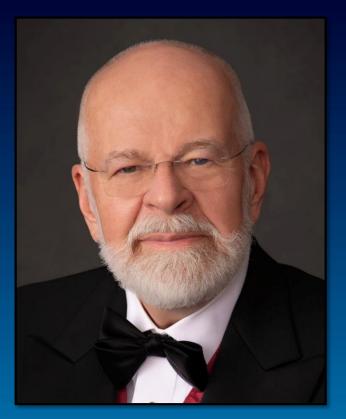


# Upstream Palliative Care Opportunities & Challenges



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### **Success of Modern Medicine...**

### **Penicillin – First Antibiotic**

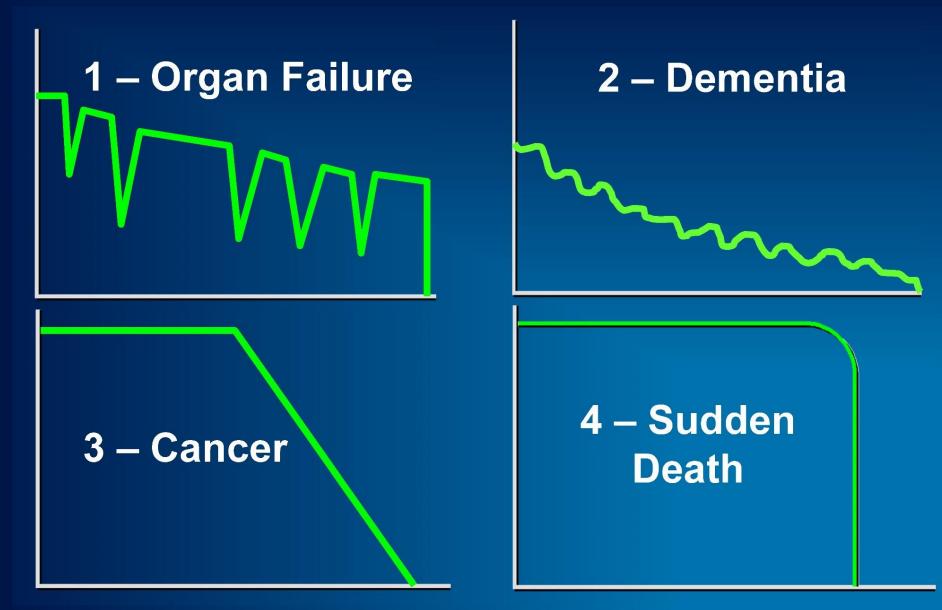
- Discovered in London by Alexander Fleming
- First used to treat pneumonia in people
- First available to general public in USA 1945

## The Evolution of Oncology Care

- Late 1940s 50's 75 years 2020s
- Nitrogen mustard
- Folic acid
- Cyclophosphamide
- Methotrexate
- Cobalt XRT
- Compazine & chlorpromazine for nausea

- Complex chemotherapy
- Immunotherapy
   Car T cell
- Linear accelerators
- Gamma knife

### **Patterns of Functional Decline**



## Multiple Issues Cause Patients & Families Suffering

#### **Disease Management**

- Diagnosis
- Prognosis
- Management

#### Physical

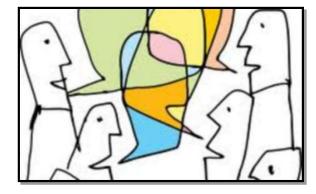
- Pain, shortness of breath & other symptoms
- Function, fluids, nutrition

#### **Psychological**

- Anxiety
- Depression
- Distress

Loss, grief

- Emotional responses
- Bereavement



#### End of life / death management

- Last hours of living
- When death occurs

#### Practical

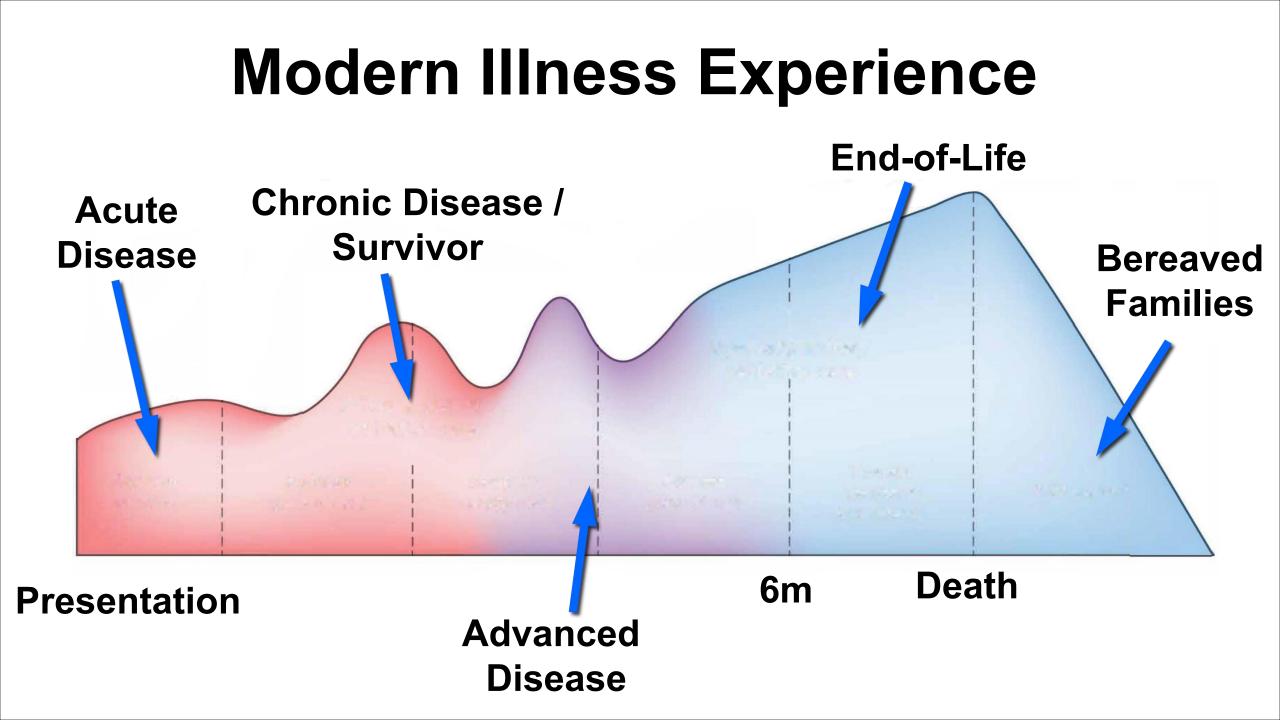
- Caregiving
- Teamwork
- Volunteers

#### Social

- Family dynamics
- Financial
- Legal

#### Spiritual

- Hope
- Meaning, value
- Existential



Palliative Care is... **New Knowledge & Skills to Manage** the Experience of Patients & Families... Prevent & relieve suffering • Promote quality of life, death & bereavement Any diagnosis • Any time there is need

Adapted From: Ferris FD et al. A Model to Guide Hospice Palliative Care, 2002. https://bit.ly/2UQyO7q

# What does Upstream Palliative Care mean to you ?

Case: Ellen Rudy Evaluated by Charles von Gunten, MD, PhD VP Hospice & Palliative Medicine, OhioHealth

- 81 yo Retired Nurse Nursing School Dean for 10 years
   " Talks Fast and Walks Fast "
- Married, 3 sons
- Pulmonary Fibrosis
- Very short of breath
- Sleeping 18 hours each day
- Significant weight loss

## Prognosis 2 – 4 weeks



## Without Palliative Care How will she end her life...?

### With Expert Palliative Care...



## Morphine 5 mg PO Q1H PRN ! "Makes me Ellen Again"

Ellen was able to get up out of bed Sleep normally... 7 – 9 hours per night She gained weight... She was able to live ! In the last 2 weeks of her life, Ellen became intolerably short of breath... Lorazepam 2 mg buccal mucosa Q12H & 1 – 2 mg buccal mucosa Q1H PRN kept her comfortable while she died

# Does Ellen's Outcome Surprise you...?

She lived another 18 months " walking and talking fast "... She died peacefully at home ( Original prognosis 2 – 4 weeks ) What would Ellen's life have been if she received Morphine PRN much earlier...?

## **Goals of Palliative Care**

#### **Help Patients**

- Eat well
- Sleep well
- Maintain function
- Reduce stress

Live better
Be themselves
Prognosis

## **Upstreaming Strategies**

### **Opportunities & Challenges...**

## **Upping Our Game**

- Be competent to provide the best to care Pathophysiology
   Pharmacokinetics
   Skilled nursing & counselling
   Effective bereavement
- A Hospice & Palliative Medicine Specialists

## Knowledge & Skills Upstream

- All primary providers have core palliative care knowledge & skills
- Education for

Medical students, residents, practicing physicians Nursing students, advance practice nurses Counsellors Volunteers

## **Hesitancy Addressed**

- Confident modeling to address clinician, patient, family, and caregiver hesitancy
- Skilled

Communication

Symptom management expertise

## **Access When Needed**

- Patient and family have access EARLY in the illness, whenever needed
  - "Triggers " help identify patients needing a consult
- Palliative care consult services available & responsive

**Practice consultation etiquette** 

 Outpatient clinics are embedded in disease management clinics
 Oncology, cardiology, pulmonology, geriatrics, etc.

## Value Understood

- Well established relationships Many in your circle of influence
- By clinicians

Help their patients live longer & better
Deal with complex & challenging patients & families
By administrators & funders
Financial advantages
Quality improvement
Patient & family satisfaction

What can the Impact of Providing Palliative Care Upstream be...

## Kit, 58 year old

- New workplace
- Pre-employment health screen
- Large peripheral lung mass on chest x-ray



### **Every Encounter...**

#### FACTS / PLANNING SHARED DECISION-MAKING



#### **BUILD TRUST**



## **Modern Illness Experience**



Longevity Work life Family

## Kit, 58 year old Peripheral lung mass on routine chest x-ray

- Wants best treatment for her cancer
- Wants to be comfortable, with family
- Wants to continue to work / life

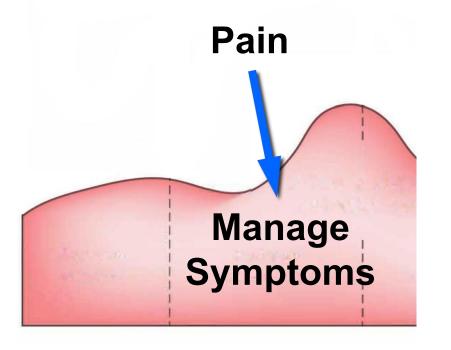


### **Initial Work-up**

- Subtotal pneumonectomy
- Adenocarcinoma, primary unknown No known metastasis
   Prognosis 8 – 13 months
- Post-thoracotomy pain syndrome
   Opioids + adjuvants to control pain



## **Modern Illness Experience**

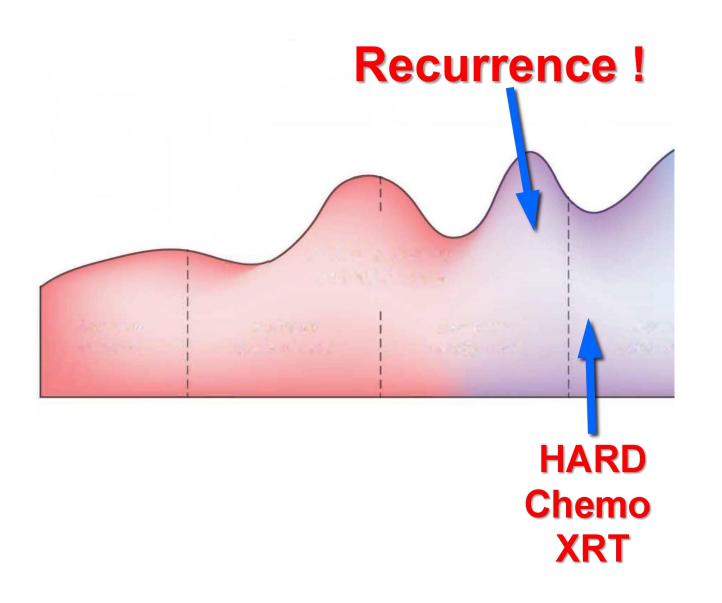


## **Illness Experience**

- 6 month later, recurrence axillary lymph nodes
- Chemo: Carboplatin & Taxol
  - → Partial response
- XRT: 6000 cGy 30 fractions
  - → Partial response
- Further Chemo -> stable disease
- At 21 months, Resection possible ?
   Missed 1 day of work



## **Modern Illness Experience**

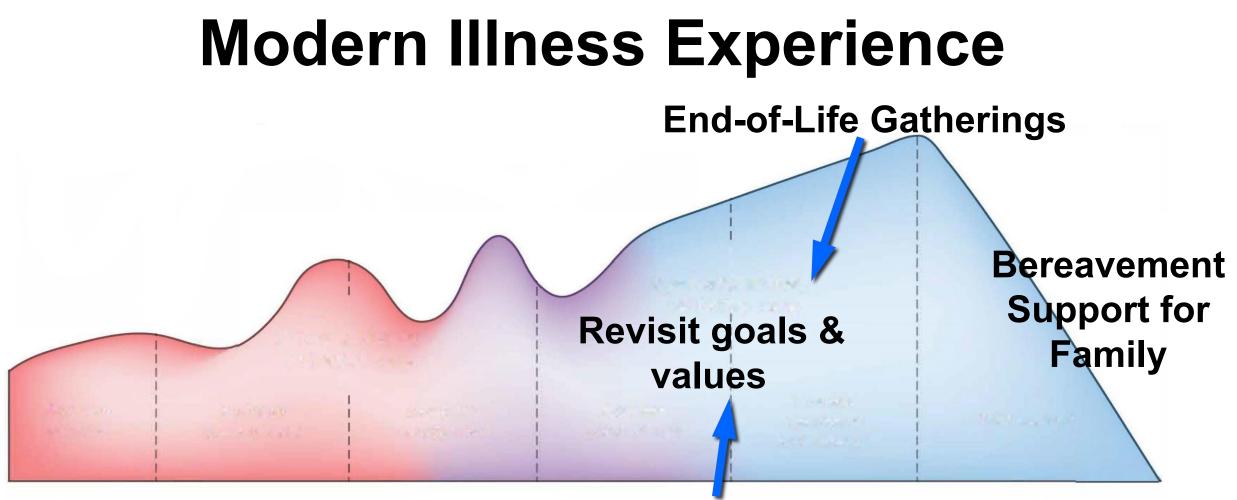


## At 21 Months, Changes Goals of Care

- Enrolls in Hospice Care
- Oncologist visits
- Resolution of relationships
- Gifts
- Surprises
- Died at home 24 months after her diagnosis
   (Projected 8 - 13 months)







Values: Comfort at home Family Longevity

Death

## Why Kit's Story was So Successful...

- Oncology & Palliative care offered in setting of trust
- Expert communication & exploration of goals & values
- Targeted treatment based on Kit's goals & values
- With progression, Kit's goals & values were revisited
- As Kit's goals & values changed, treatment plan changed

Kit had a high-quality longer life that was meaningful to her in every way

Access to Palliative Care Upstream can ↑ Experience, ↑ Survival, and may ↑ Effectiveness of Anti-disease therapies

## It's About Building Trust & Building Relationships



What are you going to do on Tuesday...?