

Caring at the end of life

'Good death is an indicator of good quality of life'

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More than 150 health care professionals are trying to come up with ways to fill the gaps found in end of life care.

Lakehead University's Centre for Education and Research on Aging and Health is hosting a three-day conference, Passport to Palliative Care: Journeys and Destinations, to address what Prof. Mary Lou Kelley calls a population health issue.

"Palliative care is a philosophy of care that focuses on quality of life and comfort," said Kelley, a professor of social work and gerontology at Lakehead. "But it is also a specialized set of skills for medical management, psychological, spiritual and social support."

She conducted a pre-conference workshop Wednesday morning on developing palliative care in long-term care homes.

"There is more and more of a desire to be able to provide end of life care for a resident in long-term care and not move them to a hospice unit or the hospital," Kelley said.

She said the average age of people entering long-term care homes is over 80, and life expectancy is on average two years, with vast variations.

With more people dying in long-term care homes, palliative care programs in long-term care homes are rare, she said.

But providing palliative care in long-term care homes would be easier for the resident, because care is provided by people who know them and who they are familiar with, said Kelley.

It is also less stressful for family members and more cost effective for the health care system, she added.

Dr. Jose Pereira, head professor of



HALEY KRASOV

Dr. Jose Pereira and Prof. Mary Lou Kelley addressed delegates to the palliative care conference in Thunder Bay on Wednesday. The conference at the Travelodge Airline runs through Friday.

the division of palliative care at the University of Ottawa and medical chief of palliative care programs at Bruyere Continuing Care and the Ottawa Hospital, said in his address that patients with other terminal diseases require the same level of palliative care as patients with cancer.

Pereira said that in Canada, most of the focus has been on cancer patients. But patients with end-stage heart failure, end-stage lung failure, end-stage kidney diseases or dementia have the same needs when it comes to palliative care.

"Sometimes those needs surpass those of cancer patients," he said. "So the question is what are those needs and how can we better address them."

Pereira and Kelley agreed that a lot of patchwork is needed across Canada to fill the gaps in palliative care and to create a national strate-

gy.

Canada is far behind nations such as the United Kingdom and Australia, and other European countries, that have policies in place to address palliative care.

"One of the great concerns I have in the country is, at the moment we have no national strategy for how to address this," he said. "The need is going to increase."

Pereira said that in 2008, there were 220,000 deaths in Canada and only 10 per cent of them were sudden deaths.

But palliative care also faces challenges at ground level, from patients and medical professionals.

"One of the biggest challenges is people are afraid of talking about death and dying and palliative care," Pereira said.

People often associate palliative care with the last few days or weeks of life, but he said that is not accu-

rate.

"We need to start changing that perception so people can start benefiting from supportive and palliative care much earlier in their illness trajectory," he said.

"The medical profession has been slow to embrace palliative care because the whole culture of medicine is to cure," Kelley added.

"When people cannot be cured, it's somehow perceived as a failure."

Kelley said she believes conferences like Passport to Palliative Care provide a good starting point for helping to get people thinking about talking about how to address the issue.

Death, she said, is a part of life and how we look at life is similar to how we should look at death.

"I think having a good death is an indicator of good quality of life," she said.