

What is Palliative Care ?

Palliative Care aims to improve the quality of life for people with a progressive life-threatening illness, their families and care givers through early identification, assessment and treatment of pain, physical, cultural, psychological and spiritual needs.

The GP role

In Australia, the general practitioner has a significant role in the management and care of the terminally ill patient and their families. Palliative Care is active care and demands a team approach.

PALLIATIVE CARE IS MORE THAN THE GP CAN DO ALONE. Your local team is

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KEY POINTS TO REMEMBER –Palliative Care

- **Involves the family, caregivers and the community not just the patient.**
- **Is for all terminal illness just not cancer.**
- **Is more than medical and physical needs. It includes psychological, social, cultural, and spiritual needs of the family and care givers.**

Approaches and attitudes to death and dying are influenced by cultural and life experiences. Many health systems across the world have palliative care services as a separate speciality and the family doctor may not have many experiences in managing terminal illness. Some cultures also respect the patient and the family by not informing the patient of their serious illness. This has been the traditional way of providing care and support that allows the family to manage the last phase of a loved family member. This also ensures that the patient will maintain a relationship with their doctor.

Some cultures have a fear and anxiety around death and the news of terminal illness will increase patients' anxiety. Other cultures have a strong faith that accepts death as a bridge to a better life although the grief and loss to the family are also acknowledged.

All these systems aim to support the family and the patient through the terminal phase.

In Australia we show respect for the patient by informing them about their illness so that they have time to plan with their families and make the most of the time they have left.

Families want to work in partnership with their general practitioner to manage their loved one. They will seek assurances that the general practitioner will remain part of the team until the end. Families will also want assurances around pain management and symptom control.

The majority of Australians (about 60%) would prefer to die at home rather than in hospital, currently only 20% manage to do so. Many health professionals still

struggle to help patients and families to accept the dying process.

The essential skill in palliative care is the ability to **communicate** to the patient and family.

Good communication benefits the patient and family as it:

- empowers them to make decisions,
- allows them to proceed with agreed courses of action
- creates realistic expectations
- increases confidence in themselves to cope

Good communication benefits the GP as it

- builds trusting relationships with patients and their families
- increases satisfaction in clinical practice

Good communication includes understanding non-verbal clues as well as listening to what is said and not said. This skill is hard to learn in the consultation, the best way to learn to understand Australians is to mix and make friends with Australians outside of work.

Acknowledging the dying process allows energies and resources to be invested in symptom control and family support. This allows the patient to make the most of the time they have left.

Do you want to learn more – Contact your local team.

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