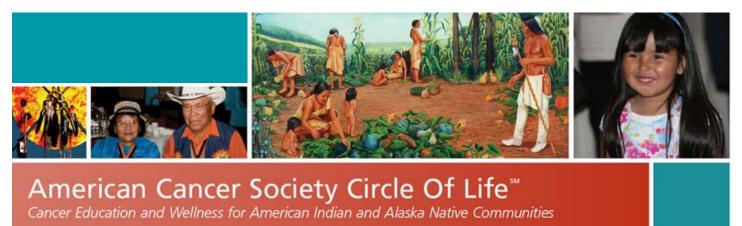
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Wellness along the Cancer Journey: Palliative Care

Revised October 2015

Chapter 2: Palliative Care



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Group Discussion			
	True	False	Not Sure
1. Palliative care is only given at the end of life.			
2. The goal of palliative is to only treat the physical side effects of cancer.			
3. Family members can also be helped by palliative care.			

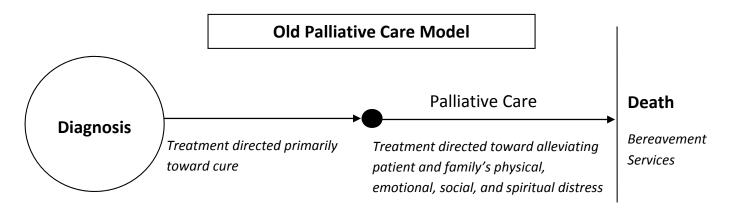
Palliative Care

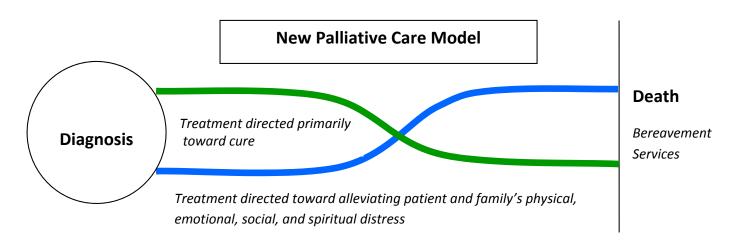
The goal of palliative care is to prevent or treat, as early as possible, the symptoms and side effects of the disease and its treatment. Palliative care also works to prevent and treat any emotional, social, and spiritual problems. The goal of palliative care is not to cure, but to help improve the quality of life. Palliative care is also called *comfort care*, *supportive care*, and *symptom management*.

At one time, people thought of palliative care as the kind of care that was offered when nothing else could be done to treat or cure the cancer. But cancer care providers have always worked to relieve symptoms as part of cancer treatment. It's now recognized that palliative care is an important part of cancer care at all stages.

Palliative care should start at diagnosis and be used during treatment and followup care, at any time it's needed. If the cancer is not cured, palliative care is also used near the end of life. Family members may also be helped by palliative care.

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(Alaska Native Tribal Health Consortium. (2009). *Models of palliative care*. Retrieved September 15, 2009, from http://www.palliativeak.org/palliative_care)

What does palliative care do?

The goal of palliative care is to prevent and relieve suffering. It seeks to support the best possible quality of life for people with cancer and their families. This is its goal no matter what the stage of the disease might be.

Palliative care will take all of these factors into account for each patient:

Physical. Common physical symptoms such as:

Pain

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- Breathing problems
- Appetite loss
- Weight loss
- Fatigue (tiredness)
- Depression and anxiety
- Confusion
- Nausea and vomiting
- Constipation
- Trouble sleeping

Many of these symptoms can be relieved with medicines. Some other methods may help, such as nutrition, physical therapy, or deep breathing techniques. Also, chemotherapy, radiation therapy, or surgery may be used to shrink tumors that cause pain and other problems. Even though these methods are most often used to cure cancer, they're sometimes used to make people more comfortable.

Emotional and coping. Palliative care specialists can guide patients and families to the kind of help they need to deal with the emotions that come with cancer and its treatment. Depression, anxiety, and fear are only a few of the concerns that can be addressed in this way. Experts may offer counseling, find support groups, hold family meetings, or refer to mental health therapists.

Social/financial. Cancer patients may have financial and legal worries, insurance questions, job concerns, and questions about <u>advance directives</u>. For many people, the technical language and fine details of laws and legal forms are hard to understand. To ease the burden, the palliative care team may help coordinate the needed services. For example, the team may direct patients and families to resources that can help with financial counseling. The team may know where to get help with medical forms or legal advice. They may also help find local and national resources, such as those that can help with transportation or housing.

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Spiritual. When a person has cancer, patients and families often look more deeply for meaning in their lives. Some find the disease brings them deeper faith. Others may question their faith as they struggle to understand why cancer happened to them. Palliative care can offer help to explore beliefs and values so that a person can find a sense of peace or reach a point of acceptance

Choosing Palliative Care

Palliative care is given along with treatment for cancer. But when a patient reaches the point when treatment for the cancer is no longer working, palliative care becomes the main focus of care. It will continue to be given to help relieve the symptoms and emotional issues of cancer. Palliative care providers can help ease the transition to end-of-life care.

In many cases, advanced cancer happens after the person has had cancer for some time and treatment is no longer working. But for some people the cancer may already be advanced when they first find out they have it. In any case, symptoms such as pain and depression can almost always be treated.

It may be hard to think and talk about this. Everyone with cancer hopes that their cancer will be cured, but this is not always possible. When it becomes clear that there is nothing else that can be done to help a person live longer, the cancer care team can begin to make some predictions about end of life. Keep in mind that these are only educated guesses; no one can ever know for sure how long a person will live. Some people can live for years with advanced cancer.

Someone may still get cancer treatment, but the goal may no longer be to cure the cancer. At this time the purpose of care is often to control symptoms caused by the cancer so they can enjoy life and feel as good as they can. When symptoms get worse, the focus of care is to make the person comfortable.

Some people think that if cancer is in many parts of the body it is the same as advanced cancer. This is not always true. Usually when health care providers speak of advanced cancer, they are talking about cancers that cannot be cured (American Cancer Society.(20). Advanced Cancer. Retrieved October 8, 2015 from www.cancer.org/treatment/understandingyourdiagnosis/advancedcancer/advanced-cancer-what-is). A

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person can have widespread cancer, but it can still be treatable and sometimes curable. Examples of this are testicular cancer, leukemias, and many lymphomas. In other cases, widespread cancer may not be curable.

On the other hand, cancer may not have spread to distant places but still be considered advanced. This may be because there is too much cancer to be removed, or it has caused major health problems. An example of this is pancreatic cancer. Or, some cancers that start in the brain are considered advanced because they cannot be cured. They can be life-threatening even if they don't spread.

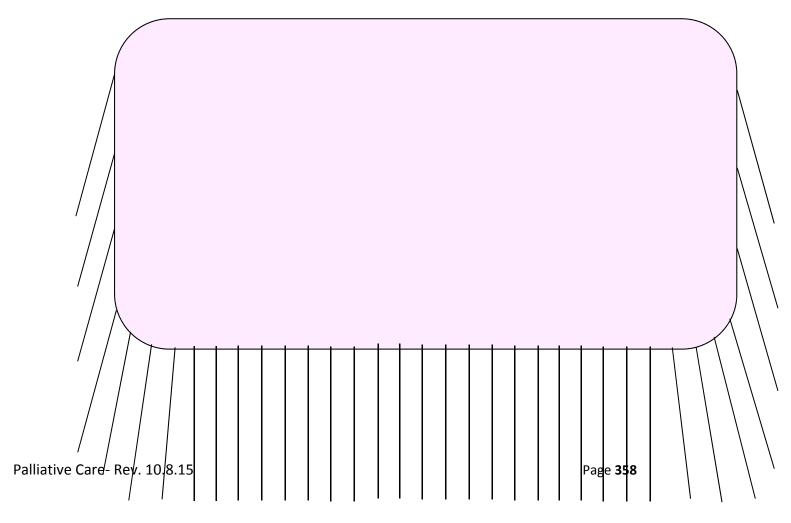
Can a family member receive palliative care?

Family members and loved ones are an important part of cancer care. Like the patient, they have a number of changing needs. It's common for family members to be overwhelmed by the extra responsibilities placed upon them. Many find it hard to care for a loved one who is ill. They still have other obligations, such as work and caring for other family members. Other issues can add to this stress. A family member may feel unsure about how to help their loved one with medical problems and emotions such as worry and fear. There may not be enough social support for the patient or the family. These challenges can compromise the health of those who are trying to help. Palliative care can help families and friends cope with these issues and give them the support they need.

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Activity

Palliative care is "active total care for the body, mind and spirit of the person with cancer and their family." – Definition from International Telehealth Palliative Care Symposium. Decorate the shawl below with words, symbols or pictures that show how palliative care can help someone.



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Story of Hope

"I encourage people who are terminal with cancer to tell your family about it. To tell your children, to tell your aunties, your sisters, your mom and dad whomever. Give your family an opportunity to come and help you if they can. Sometimes they have strange reaction to that kind of information, but tell them." CeCe Whitewolf, Confederated Tribes of Umatilla breast cancer survivor

(Clark, R., (Producer) & Whitewolf, C. (Artist). (2007). *Survivor Video Vignettes: Let Others Help Uou*. [Web]. Retrieved from http://www.natamcancer.org/vignettes/cc5-palliative.html)

Key Messages

- The goal of palliative care is to support the best quality of life for the person with cancer and their family. Accepting palliative care does not mean someone is giving up, only that they wish to have a good quality of life.
- People have the right to decide what types of treatment they want, and they may still choose to have palliative treatment.
- Make a note of all cancer-related pain and concerns to discuss with the health care provider.