

Hospice and Palliative Care

By Bruce E Money, MD, FACP

Lake Region Healthcare Internal Medicine and Medical Director of Lakeland Hospice

Hospice and palliative care is a multidisciplinary medical delivery service that emphasizes reduction of symptoms and comfort care in patients that have serious medical conditions. Most medical models emphasize curing illness and restoring health. The goal for both palliative care and hospice is to improve quality of life for the patient and the family as they struggle with serious medical problems.

As all of us can appreciate, not all diseases are curable. Some lead to chronic symptoms and debility. Some are terminal. Hospice care is a holistic model that addresses the physical, emotional, social and spiritual health of the patient and families in patients that have life expectancies of six months or less when the disease follows its usual course. The patient is not taken off hospice care if the 6 months is surpassed. The health model changes from finding treatments to cure the illness to symptom management to alleviate pain and distressing symptoms. The difference between hospice and palliative care is that patients in palliative care are still seeking active treatment for their illness, but have chronic illness and symptoms that need multidisciplinary care.

The multidisciplinary team includes physicians, nurses, pharmacists, social workers, chaplains, volunteer coordinators, bereavement specialists, and other allied health professionals. These professionals work in a coordinated fashion to address the physical, spiritual and social problems that confront patients and families of patients. Management of pain and symptoms such as shortness of breath, nausea and vomiting are a priority in this care model. However, other symptoms and issues such as depression, grief, spiritual concerns, financial problems, family dynamics and bereavement/expectant loss are also addressed.

Hospice care is currently funded through Medicare for eligible patients. The Medicare benefit includes 24-hour/7 days a week access to care, all medications related to the illness, medical supplies including hospital beds and oxygen, nursing care, chaplain and social worker support, and support for the grieving family after the death of the patient. Most patients are cared for in their homes. However, hospice care is also delivered in nursing homes, assisted living facilities, hospitals, and VA facilities.

Currently palliative care is not funded through a defined benefit program and is dependent on individuals, insurance plans and other sources. Hopefully, with healthcare reform and the emphasis on quality of care, more funding will be directed to support palliative care.

The main principle of hospice and palliative care is that although we face disease, suffering and death in the cycle of life, each person deserves to be treated with respect and dignity. All efforts should be made to alleviate adverse symptoms and everyone should have the opportunity to live life to the fullest until their last breath.

In our area, hospice care is through Lakeland Hospice and New Dimensions has a palliative care service. If you have questions on these services, I'd recommend contacting their respective offices.