

Palliative Care

Palliative care is a holistic approach to health care that begins when an individual is diagnosed with a life-threatening condition that continues until he or she dies. The aim is to relieve patient suffering and improve the quality of living and dying.¹ As a pharmacist, you are part of the health care team that supports patients and families during this time.

The Pharmacist's Role

Palliative care patients may be dealing with multiple symptoms, depending on their condition.² These may include pain, discomfort or difficulty with breathing, nausea and/or delirium.^{6,7} Virtually all palliative care patients require medications to manage symptoms, and you should be recognized as a key consultant in their care.⁵ Pharmacists are the most accessible health care providers and are often the “go-to” people for suggestions on dealing with challenging symptoms.⁷

A pharmacist's advice is sought to determine the best routes of administration and when it is appropriate to consider alternative uses of medications. As the gatekeepers to medicines and pharmaceutical solutions, pharmacists are responsible for ensuring that the medicines prescribed are easily accessible to the patient. Their unique understanding the purposes of medications, and the effects of the medications their patients are already taking, allows them to provide a useful perspective on medication management at the end of life.⁵

“Pharmacists can provide a useful perspective on palliative medication management.”



Pain Assessment

An initial comprehensive pain assessment supports the palliative care team and patient in developing an individualized treatment plan.⁴ The patient's self-report should be the primary source of information.³ Assessment should include inquiring about pain quality, intensity, frequency, onset, duration and location, as well taking a medication history and identifying treatment goals.⁹

One way to assess pain is to simply ask the patient, “On a scale from 0 to 10, with 0 being no pain at all and 10 being the worst pain imaginable, where are you now? What was your best/worst pain in the last 24 hours?”³

Non-opioid Pain Management

Nonpharmacologic measures, non-opioids and adjuvant medications should be considered at all stages.^{4, 7-10}

- **Nonpharmacologics:** Consider transcutaneous electrical nerve stimulation (TENS), massage, acupuncture, application of heat/cold, music, relaxation and imagery
- **Non-opioids:** These may have a dose-sparing effect when used with opioids.⁴ They have a ceiling effect in which doses above a certain threshold will not improve analgesia but will increase the risk for adverse effects. Acetaminophen is recommended as the first-line non-opioid agent due to its favorable adverse-effect profile. Use with caution in those with liver impairment, and do not use above the daily maximum dose
- **Adjuvants:** Try one at a time, and provide adequate trial at the optimal dose prior to discontinuing and/or adding another. For metastatic bone pain, radiation therapy can be helpful, as can bisphosphonates (e.g., pamidronic or zoledronic acid), desunomab, or corticosteroids (e.g., dexamethasone). For pain related to bowel obstruction, try corticosteroids to decrease inflammation or hyoscine to decrease colic. For neuropathic pain, early management is optimal to minimize “wind-up” of the nervous system. Medications with different mechanisms can be used, and often a combination is required. Consider the efficacy, adverse effect profile, convenience and cost of taking each medication before deciding on treatment.

How You Can Help

Patients often require multiple medications toward the end of life, and pharmacists play an important role in assisting with pain assessment, dose titration, monitoring adverse effects, ensuring adherence and working with the palliative care team.^{2,7}

- **Inquire** about pain and inform patients or caregivers about pain management options
- **Assess** other symptoms, including nausea, dyspnea (breathlessness or difficulty breathing) and delirium
- **Advise** the palliative care team, as appropriate, regarding routes of administration, discontinuation of certain medicines and renal clearance

Online Resources

Offer this list to patients looking for more information about palliative care.

Get Palliative Care

www.getpalliativecare.org

Promotes a team-based approach to palliative care

Family Caregiver Alliance

www.caregiver.org

Support and advocacy for families providing long-term home care

Caring Connections

www.caringinfo.org

Resources to help improve care at the end of life

National Hospice and Palliative Care Organization

www.nhpco.org

Provides emotional support and hospice options for families and patients

References

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