



A Different Kind of Holiday Gift

Palliative Care: Comfort for Those Who Don't Want to Hurt

"I'm not afraid to die; I just don't want to hurt."

An 81 year old grandma with terminal cancer expresses her final wishes to the family. And all of us understand. Some may fear dying, but no one wants to suffer.

"Palliative care" is the sort of health care that aims to minimize suffering, to relieve the hurts of patients, to focus on care rather than cure, relief if not recovery—to keep us comfortable.

It's not just for those who are old and dying, either. "Hospice" is palliative care at the end of life; but palliation or comfort care is something that all of us want whenever we're hurting.

Sadly, it is far too common to find patients uncomfortable and in pain, whether hospitalized, in nursing homes, or at home. Studies show that 25 million of us undergo surgery each year and most of us, 60%, will be undertreated for our pain. More than 60% of cancer patients are in the same boat, uncomfortable despite treatable pain. Chronic, non-cancer pain afflicts 50 million Americans. At least some could be palliated.

More distressing might be suffering due to anxiety, depression, medication side-effects, the burdens of being ill and being treated. Could palliative care help?

Fortunately, it is now possible to keep most patients comfortable. We have the knowledge, if not yet sufficient resources, to manage symptoms well and reduce or even eliminate pain, especially for the seriously ill and dying. Palliative medicine is still improving, even while palliative specialists are too few. But their numbers are increasing. Palliative care teams and consultations are becoming more common.



Those who are blessed to receive such care are helped more often than not.

With the advent of palliative medicine, comfort happens—but it doesn't just happen. We might have to ask or insist. Patients may request of their attending physician a palliative care team consult. Family members and faith leaders need to remind medical caregivers untrained in palliative medicine that comfort is a priority and that Grandma deserves the very best palliative care available.

She may need an advocate for palliation especially if there comes a time when words no longer form on Grandma's own lips. Then someone must say, "She's not afraid, you know; she just doesn't want to hurt."

Do you?

Resources:

- **St John Health** provides excellent palliative care and online resources: <http://www.stjohn.org/PalliativeCare/>
- The **Duke Institute on Care at the End of Life** provides an annotated list of other helpful websites: <http://www.iceol.duke.edu/resources/index.html>
- The **Center for Practical Bioethics** website is a treasure trove of print resources, many of them freely downloadable: <http://www.practicalbioethics.org/cpb.aspx?pgID=868>
- Caring Connections, a program of the **National Hospice and Palliative Care Organization** (NHPCO), is a national consumer and community engagement initiative to improve care at the end of life. Brochures for congregations can be downloaded free or ordered at: <http://caringinfo.org/Resources/Brochures.htm>
- **To access this article, please visit** <http://www.stjohn.org/PalliativeCare/>

Rev. Tarris Rosell, PhD, DMin
Center for Practical Bioethics
Central Baptist Theological Seminary
Consultant, Duke Institute on Care at the End of Life

