Palliative Care

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Treatment that **enhances comfort** and **improves the Quality of Life** of an individual’s life during the last phase of life.

*Tabloski, 2014*
Palliative Care aims to help support older adults who have a life threatening illness but whose life expectancy is more than 6 months but typically less than 5 years.

Bonham Howe, 2015
Palliative Care is achieved through:

- Prevention and relief from suffering
  - Early identification
  - Impeccable assessment
  - Treatment of pain

- Recognition and treatment of:
  - Physical,
  - Psychological,
  - Spiritual problems

(Surgery, Chemotherapy, Radiotherapy,...)
Palliative Care Incorporates

Disease prevention
Symptom control
Life extension efforts

Reflecting the unique needs of the individual

Quality of Life
Palliative Care

Care of the body, mind & spirit: Focusing on, social, emotional, cultural, spiritual & intellectual or knowledge aspects of care supported by an interdisciplinary team and training.

Holistic Approach

Patient-centred care incorporating respect for patients’ values and preferences, provides information in clear and understandable terms, promotes autonomy in decision-making and attends to the need for physical comfort and emotional support.

Quality of Life

Patients referred to DPH have an expectation of dying, therefore care of the families is included in the care i.e. Care of the infected and affected by the team while the patient is alive and into the bereavement period.

Patients & families

Identification, impeccable assessment & treatment of symptoms

Identification: knowledge & recognition of symptoms.; Impeccable Assessment: knowledge based professional evaluation; Treatment: Medication management, specialist referral, holistic intervention by Palliative Trained Team.