Palliative Care for Geriatric Patients

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Part I: Dying Well

A natural part of life
Opportunity for growth
Profoundly personal experience

A “Good Death” Defined

Be free of suffering
Achieve life closure
Receive care consistent with one’s beliefs, wishes and values
Concept of Suffering

- State of severe distress that threatens intactness of the person
- Failure to respond to person's needs intensifies suffering
- Sources of suffering

Cherney, 2010; Ferrell & Coyle, 2008

Life Closure: A Personal Experience

- Completion with worldly affairs
- Completion of community relationships
- Meaning about one's individual life
- Love of self
- Love of others

Life Closure: A Personal Experience (cont.)

- Completion of family/friend relationships
- Acceptance of the finality of life
- New self beyond personal loss
- Meaning about life
- Surrender to the unknown - “Letting go”
Dying Well – Goal of Hospice and Palliative Care

Ensuring “good death” by addressing the needs of patients and their families and promoting a high quality of life.

Quality of Life Model

- Physical Well-Being
- Psychological Well-Being
- Social Well-Being
- Spiritual Well-Being

http://prc.coh.org

Quality of Life

Physical
- Functional Ability
- Strength/Fatigue
- Sleep & Rest
- Nausea
- Appetite
- Constipation
- Pain

Psychological
- Anxiety
- Depression
- Enjoyment/Leisure
- Pain Distress
- Happiness
- Fear
- Cognition/Attention

Social
- Financial Burden
- Caregiver Burden
- Roles and Relationships
- Affection/Sexual Function
- Appearance

Spiritual
- Hope
- Suffering
- Meaning of Pain
- Religiosity
- Transcendence

http://prc.coh.org
Physical Well-Being

• Pain
• Other symptoms
• Impact on family caregivers

Psychological Well-Being

• Wide range of emotions and concerns
• Meaning of illness
• Depression
• Coping
• Cognitive assessment

Social Well-Being

• Relationships/role description
• Caregiver burden
• Impact on family
• Financial concerns
• Sexuality concerns
Spiritual Well-Being

- Religion and spirituality
- Seeking meaning
- Hope vs. despair
- Importance of ritual

The Goal of End-of-Life Care

- Goal of EOL care is a “good death”
- Addressing the multiple dimensions of quality of life helps ensure a “good death”

Extending Palliative Care Across Settings

- Nurses as the constant
- Expanding the concept of healing
- Becoming educated
Illness/Dying Trajectories
Sudden Death, Unexpected Cause

< 10% (MI, accident, etc.)

Health Status

Death

Time

Field & Cassel, 1997

Illness/Dying Trajectories
Steady Decline, Short Terminal Phase

Health Status

Death

Time

Field & Cassel, 1997

Illness/Dying Trajectories
Slow Decline, Periodic Crises, Death

Health Status

Decline

Crisis

Death

Time

Field & Cassel, 1997
Illness/Dying Trajectories Lingering, Expected Death

Lunney et al., 2003

Site of Death

Site of Death 2007
- Hospital 35.3%
- Home 23.7%
- Nursing Home 27.9%
- Other 8% (includes hospice)
- ED/Outpt 2%

Site of Death by Age
- Nursing Home 33% ages 75+
- Nursing Home 42% ages 85+

National Center for Health Statistics, 2011

Barriers to Quality Care at the End of Life

- Failure to acknowledge the limits of medicine
- Lack of training for healthcare providers
- Hospice/palliative care services are poorly understood
- Rules and regulations
- Denial of death

Clare et al., 2003; NHPCO, 2010
Hospice and Palliative Care

- **HOSPICE**
  - Most intense form of palliative care
  - Less than 6 months to live
  - Agrees to enroll in hospice program
  - Chooses not to receive aggressive curative care

- **PALLIATIVE CARE**
  - Ideally begins at the time of diagnosis
  - No life expectancy requirement
  - Can be used to complement curative care

Definition of Palliative Care

- Palliative care is both a philosophy of care and an organized, highly structured system for delivering care. Palliative care expands traditional disease-model medical treatments to include the goals of enhancing quality of life for patient and family, optimizing function, helping with decision-making and providing opportunities for personal growth. As such, it can be delivered concurrently with life-prolonging care or as the main focus of care.

Palliative Care: Continuum of Care
Nursing Homes are Ideal Sites to Implement Palliative Care

- Nursing home as the site of death is increasingly common for the oldest old
- Many NHs already have integrated palliative care principles
- Hospice providers that partner with NHs enhance EOL care
- EOL care in NHs with the addition of hospice services to usual care improve the quality of EOL care

Egan-City & Labyak, 2010; Hanson & Ersek, 2006; Carter & Chichin, 2003; Stevenson & Bramson, 2009

Room for Improvement

Despite progress, there is room for improvement in EOL care for older adults

Hospice for Patients with Advanced Dementia

- Only 11% of nursing home residents with advanced dementia are referred to hospice
- < 1% of hospice patients have primary diagnosis of dementia

Mitchell et al., 2004a, 2004b & 2005
Eligibility:

- FAST stage 7 and one or more dementia-related complications in past year
- Upper respiratory infection
- Septicemia
- Multiple pressure ulcers, stage 3-4
- Fever recurrent after antibiotics
- Aspiration pneumonia
- Insufficient fluid/food intake with 10% weight loss in prior 6 months or serum albumin < 2.5 gm/dl

Carol Long, PhD, RN, FPCN
Beatitudes Campus, Phoenix, AZ

- Nursing researcher, committed to ensuring those with dementia receive comfort care from competent staff
- Partnering with the Alzheimer’s Association, NYC Chapter to improve palliative care in 3 LTCFs and 3 area hospices
- Impressive international work

Pat Trotta, MSN, RN, CHPN
VNA Healthcare's Hospice/HOPE team, Hartford, CT

- Organized 1st state-wide ELNEC-Geriatric course funded by the CT Dept of Public Health
  - 50 nursing educators from nursing homes and other facilities attended
- Collaborates with CT Cancer Partnership and CT Coalition to Improve EOL Care
Lores Vlaminck, MA, RN, CHPN  
Lores Consulting  
Rochester, MN

- Former Adm/Dir of a Medicare certified home care and hospice program
- Dedicated to teaching those working with the elderly about palliative care
  - Travels across the country to educate nurses in nursing schools, SNFs, acute care settings, etc.

Final Thoughts…..

- Quality palliative care addresses quality-of-life concerns
- Increased nursing knowledge is essential
- “Being with”
- Importance of interdisciplinary approach to care