

PALLIATIVE CARE UPDATE

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Marie Curie
Cancer Care



Learning outcomes

- Knowledge of opioid basics
- Anticipatory prescribing
- Confidence in managing symptoms in the dying patient

**“Adding quality to life
even though it is not
possible to add days to
life”**

Twycross



Case 1

You are asked to visit Mrs A, a 60 year old lady who has breast cancer and bone metastases. She has been taking Co-codamol 30/500 8/day and Ibuprofen 400mg tds for hip pain where she has a known metastasis and has had previous radiotherapy with no more available. Her prognosis is in terms of months. The pain is now worse.

What would you do?

Case 2

You are called out again to see Mrs A again. She has been stable for a few months on zomorph 30mg bd. She has started with nausea and vomiting over the last 48hrs and cannot tolerate her oral medications. She is not dehydrated and wants to be at home. her prognosis is now in terms of weeks.

What would you do?



Case 3

You are called to see Mrs A who appears to be in her last days of life.

She has a 50 mcg Fentanyl patch in place. She is comfortable now but has needed a total of 50mg SC diamorphine in the past 24 hrs with good effect. She is agitated and has noisy breathing. Unfortunately there are no medications at the house. She wants to die at home and her family are supportive of this.

What would you do?

What can the hospice offer?

- Macmillan/Marie Curie CNS -0121 703 3600
- 24/7 medical advice-0121 703 3600
 - In hours-ask for community medical doctor
 - OOH
 - Nurse in charge on IPU
 - Consultant for telephone advice

What can the hospice offer?

Community Medical Team

- 2 Consultants-Dr Sarah Wells and Dr Nikki Reed
- 1 Specialty doctor-Dr Kath Newton
- 1 Specialist Registrar

- OPAs-Usually joint with CNS
- Domiciliary visits-Joint with CNS+/- GP/DN
- Fatigue, Anxiety and Breathlessness clinic
- Education-Programme at hospice, Protected learning time, In practice, Significant event discussions.

ANY
QUESTIONS?

