

Renal Palliative Care

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- What is Palliative Care ?
- The potential role of Palliative Care in Nephrology
- A developing model

What is Palliative Care ?

WHO definition (2002)

Palliative Care is an approach which improves the quality of life of patients and their families facing life-threatening illness, through the prevention and relief of suffering by means of early identification and impeccable assessment and treatment of pain and other problems, physical, psychosocial and spiritual.

What possible role does Palliative Care play in
End Stage Renal Failure ?

In Australia – the mean age of commencement on Renal Replacement therapy is 60.4 years
(ANZDATA Registry 2009 Report)

Increasing number of patients returning to dialysis after transplant failure.

The age cohort that has the greatest prevalence is the 65-84 year old group.

ESRD patients

Overall patients with ESRD
with or without RRT have a
reduced life expectancy
compared to age-matched controls.

DIALYSIS

For patients on dialysis 15.4 % die each year
(ANZDATA Registry 2008 Report)

For those aged 75 years and older that figure is
25 %

The circumstances in which patients with ESRD die varies considerably

If it is an expected death (eg. after the cessation of dialysis) the management of the dying phase is crucial

and the manner of that dying will be remembered forever by the family

Patients with ESRD have a significant symptom burden related to both the disease itself and other co-morbidities

Overall QoL is very resistant to significant change

Palliative Care/ a palliative approach can play an important role throughout the course of ESRD

Timing of involvement

- Purely Conservative Management
- Pre-Dialysis
- Dialysis
- Withdrawal from Dialysis
- Terminal phase

Realistically, given issues of manpower,
it may not be possible for a Palliative Care
health professional to be present in every
Renal Unit

What are the core competencies in a
“Palliative approach” to patients with ESRD ?

4 Pillars of a Palliative approach

- Communication
- Symptom management
- Psychosocial support
- Care of the dying patient

Conservative management of ESRD

If this is being raised as an option :

What does a Conservative pathway mean ?

What is its content ?

Can we make predictions about their
course ?

Challenge is

to ensure that this pathway of management is not seen as “second best” or inadequate

but is thorough, systematic and evidenced-based

Renal Medicine

Calcium/Phosphate

Anaemia

Fluid balance

Palliative approach

Symptom management

Psychosocial support

Care of the dying

What would be nature and shape of a collaboration between the Renal Medicine and Palliative Medicine ?

One Model

St George Hospital, Sydney

Collaboration between the Renal Medicine
and Palliative Medicine Departments.

1. Formation of a Renal Medicine – Palliative Care Working Group

2. Formation of a Renal Supportive Care Clinic

March 2009

- Held every week
- Held in the Renal Unit
- Palliative Care Consultant, Advanced Trainee in Renal Medicine, Renal Clinical Nurse Specialist and Renal Social Worker

All patients with ESRD according to needs

Main categories of patients who are referred to the clinic :

- Patients who are on a conservative pathway
- Patients who need assistance in decision making around choosing dialysis or not
- Patients who are on dialysis and have cancer or other terminal conditions.

- Patients on dialysis who are experiencing symptoms which are difficult to manage
- Patients on dialysis who need assistance in decision making regarding withdrawing or continuing with dialysis

- Focus on symptom management
- Psychosocial support
- Preliminary discussions on ACP

3. Research

4. Twice weekly ward rounds of in-patient
Renal patients according to needs

5. Teaching programme for Junior
Medical Staff, including Nephrology
Trainees on all aspects of Renal-
Supportive Care

6. Advance Care Planning

7. Preparation of documents :

(a) End of Life Pathway for Renal Patients

(b) Commonly used Palliative medications in the context of CKD

(c) A Renal-Palliative Care Reader

8. Annual Renal Memorial Service

Conclusion

- A “palliative approach” may be adopted at any stage in the course of CKD
- There are several aspects to that approach
- One model of collaboration