Master Class in Palliative and End-of-Life Care;

Introduction

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Palliative care

WHO defines PC as “…The comprehensive approach that improves the quality of life of patients and their families facing problems associated with life threatening illness, through the prevention and relief of suffering by early identification and impeccable assessment and treatment of pain and other problems, physical, psychological and spiritual”.
Affirms life

Promotes quality of life

Treats the person

Supports the family
Palliative Care in Lebanon;
Fact Sheet

1995

- Pain Relief and PC identified as a priority at WHO National Cancer Control Workshop.
- Official morphine quota for Lebanon was 0.5 kg.
- Only 95 patients were registered to receive opioids.
1999

• Symposium on PC and Ethics organized by LCS.
• Efforts focused on establishing PC services in the country.
• Recommendations submitted to MOH in addition to an action plan to WHO.
Fact Sheet

2000

- Workshop organized by LCS and sponsored by WHO, MOH and the Clinical Research Institute in Montreal to identify principles and barriers for establishing Pain Relief and PC.
- Examples of undergraduate curricula provided. Deans and directors of nursing and medical schools were motivated to introduce a curriculum on Pain and PC and to select fellows for overseas education.
2001

- Nine fellows sponsored to attend the “Education of Physicians on End-of-life Care” (EPEC) training course in the US followed by one week of bedside training in PC services.

- National conference held November 2001 to evaluate the results achieved by fellows after training in the US.
Fact Sheet

2003
- Educational activity organized by Pain and PC Group: Palliative Care in the Elderly

2004
- Educational activity organized by the Pain and PC Group: Role of Nurses in PC and Home Care
2006

- Abu-Saad Huijer conducted a study in 15 hospitals on KAP of nurses and physicians related to PC in Lebanon.
- Almost 100% reported that PC services need to be developed in Lebanon.
- Only 19% percent of physicians routinely informed terminally ill patients about their diagnosis.
- 99% of RNs and MDs reported that CE programs in PC are needed in Lebanon.
Fact

- PC provides better outcomes than usual care and is cheaper
- PC not a recognized specialty and PC services not reimbursable
- Only 5-10% of patients who need PC receive it
- Laws do not facilitate planning at end of life. Advanced directives do not exist
- Opioid prescription laws remain restrictive
Fact

- Opioids can only be given to cancer patients but not to patients suffering from other causes of pain.
- Only oncologists and pain specialists can prescribe opioids.
- Although prescribing laws have been relaxed, it is still difficult for patients to obtain their opioid medications as multiple signatures are required.
Challenges

- At the professional level; lack of knowledge and skills as well as inappropriate attitudes and behaviors among health professionals.
- Practice and system challenges include lack of resources, inadequate financial coverage, poor coordination of care, problems with drug availability and accessibility, and lack of legislation and recognition of the specialty areas.
May 2011

Conference on ‘Cancer Pain and PC’ organized during MEMA. Decree for Mandate of National Plan on Pain Relief and Palliative Care; approved.

- Education
- Practice
- Research
- Public Policy
Mandate

Education

- To recommend a core curriculum to be used in the training of health care professionals with emphasis on knowledge, attitudes, and skill development.
- To recommend specialization trajectories of physicians and nurses in the field.
- To institute the importance of continuing professional education in the field as a requirement for recertification and licensure.
- To develop strategies for public education in the field.
Mandate

Practice

- To develop national standards and competencies for pain relief and palliative care.
- To develop strategies to engage professionals from different disciplines in the care process such as the use of multidisciplinary care pathways.
- To recommend models for service delivery such as home care and residential care and the use of palliative care teams in hospitals.
- To develop mechanisms to empower the family and the patient to be actively involved in the care process emphasizing the importance of family and patient-centered care.
**Mandate**

**Research**

- To develop national research priorities for the field of pain relief and palliative care that target gaps in treatment, knowledge transfer, education, & policy.
- To recommend research methods to address the gaps in information related to pain relief and palliative care in Lebanon.
Mandate

Public Policy

- To develop strategies that will ensure the availability, accessibility, & prescription rights of opiates.
- To recommend strategies that will ensure the practice of interdisciplinary PC teams.
- To recommend appropriate legislation for the regulation of pain relief and PC for adults and children in Lebanon.
- To recommend models for cost allocation and reimbursement for pain relief and PC services.
- To recommend the institution of pain relief and PC as integral parts of the health care system in Lebanon.
UPDATE

National Committee on Pain Relief and PC is multidisciplinary; Dr. Walid Ammar President and Dr. Huda Huijer and Dr. Michel Daher Vice-Presidents

The 4 subcommittees chaired as follows: Dr. Michel Daher: Education; Dr. Hibah Osman, Practice; Dr. Huda Huijer: Research; and Mrs. Helen Nuwayhid: Public Policy.

4 reports completed.
UPDATE

- Launch of the National Committee and the 4 reports took place on October 13, 2012.
- Conference well attended with press coverage.
- Special Issue was published July 2012 by the Syndicate of Private Hospitals ‘Human and Health’.
- Another special issue is currently being prepared for publication in LMJ.
UPDATE

- Opioid recommendations were made and majority approved.
- Prescription rights are under discussion.
- Recognition of PC as a medical discipline.
- PC as a nursing specialty area with possible certification.
- PC course for AUBMC nurses
- PC committee and PC service at AUBMC.
- PC Home Care services