

ABSTRACT

Drug management in the palliative phase

Palliative care is an approach that improves the quality of life of patients and their families facing the problem associated with 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.

Good symptom management in Palliative Care is associated with improved patient and family quality of life, greater treatment compliance, and may even offer survival advantages.

The management of five common and distressing symptoms commonly experienced by people with advanced cancer (pain, breathlessness, nausea and vomiting, fatigue and delirium) and Drug management in palliative sedation are presented .

Opioids, specifically morphine, remain the first-choice analgesic for moderate to severe cancer-related pain.

Neuropathic pain is treated by different medicines to those used for pain from damaged tissue. For chronic neuropathic pain in adults, different cannabis-based medicines have been used and studied but there was no high-quality evidence.

Core Palliative Care Medicines List for Community Pharmacy (medicines and indication/(s) for use in the last days of life) is useful.

Opioids are highly recommended by the World Health Organization, particularly in cancer pain management: the distorted patterns of the worldwide availability and accessibility of opioids are a sensitive and complex issue. Opioids crisis needs a balanced approach.

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Deprescribing in the palliative phase: tools, guidelines and interactive case discussions

Patients who are no longer eligible for curative treatment in an oncology setting are often complex and require a multidisciplinary approach. To achieve best support and symptom relieve, different medical specialists should cooperate in developing a care plan for patients in the last stage of their lives. For this reason, many hospitals have set up integrated palliative treatment teams, generally including a specialised nurse, oncologist, psychologist, pain specialist (anaesthetist) and dietician. In this session, you will learn how the oncology pharmacist can aid in such a team in deprescribing of drugs for which the appropriateness may be questionable. This process of “deprescribing” is defined as the process of identifying and discontinuing drugs for which existing or potential harms outweigh existing or potential benefits within the context of an individual patients’ goals, current level of functioning, life expectancy, values and preferences.

An overview of available deprescribing tools and guidelines will be presented, and case discussions will be used to examine the practical use of these tools and guidelines. It has been demonstrated in several trials that reducing the pill burden for palliative patients can increase the quality of life while decreasing the risk of side effects or worse clinical outcomes. Thus, optimizing the pharmaceutical care plan represents an important stage in the oncology patients journey where the pharmacist can play an important role.