

## PCAG Newsletter

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## Palliative Care in the COVID-19 Pandemic

"The COVID-19 pandemic has highlighted the importance of palliative care in all healthcare systems. " - Dr. Tedros Adhanom Ghebreyesus, Director General of the World Health Organization

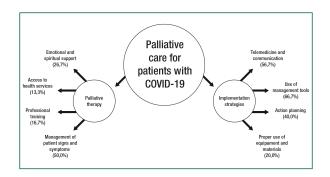
C OVID-19 was declared a pandemic in March, 2020 and the world has not been the same since. Millions of people have died from the virus since its emergence, and the number continues to rise every day. Although the pandemic affected several aspects of the world as we know it, all healthcare systems worldwide severely felt its burden. Additionally, with rapidly rising COVID-19 infections, there were significantly more patients who required palliative care services in all its domains: physical, psychological, social, and spiritual.

There were several challenges regarding palliative care during the COVID-19 crisis. Firstly, a great proportion of patients with the illness deteriorated rapidly, making it difficult to introduce palliative care treatments in a timely manner. Moreover, there were limitations on many resources in the pandemic, including the availability of palliative care specialists. These specialists faced extreme stress and burnout, and there were severe shortages of supplies and medications. Discharge options for some patients were limited, meaning they were not able to receive end of life care in their preferred place. There was also a lack of guidance when it came to palliative care as reported by healthcare professionals.

Physical symptoms
Psychological symptoms
Social needs
Spiritual needs
Timely advance care planning
Timely advance at risk for complicated grief and

certain prognosis and sometimes sudden unexpected deterioration source limitations: skilled clinicians, piles, discharge options wance care planning: lack of knowledge, tertainkt, time constraints, fear of ertainkt, une constraints, fear of kolt multidiscipilnary collaboration munication with patients and families mpered by isolation, social distancing and sonal potection equipment trictions in family visits optie dying alone

Janssen, 2021



Florêncio, 2020

While the healthcare industry faced these and several more challenges to providing palliative care in the COVID-19 pandemic, many centres were able to adapt and respond quickly. The pandemic also helped facilitate changes in the palliative care sector, such as helping with advance care planning. Awareness for this increased significantly in the healthcare community, starting important conversations. Advance care planning was integrated as a regular part of clinical care and it became a standard part of multidisciplinary meetings. The pandemic also highlighted the need for training all physicians in the skills of primary palliative care, such as communication and advance care planning.

Although the pandemic brought with it several difficulties for the healthcare system, it highlighted the areas where palliative care was especially lacking. The significant need of COVID-19 patients for palliative care helped accelerate the process of targeting these areas and implementing better systems in clinical centres. Palliative care services worldwide have rapidly developed their services in response and found opportunities to support patients and their families. Increased multidisciplinary collaboration, integrated palliative care, and education across all specialties in primary palliative care skills are needed to be able to face future demands of such a pandemic

## References

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