Pain and Symptom Management

1) Define palliative care

2) Briefly identify medical interventions in the management of pain and physical distress that may occur during the dying process

3) Briefly describe benefits and side effects of the following end-of-life medical procedures: mechanical ventilation, cardiopulmonary resuscitation, renal dialysis, enteral or parenteral nutrition, and intravenous hydration

4) Be prepared to use, and the teach the family to use, a pain rating scale to assess and document level of pain

5) Identify ways a volunteer can provide comfort to a person in pain or physical distress

Palliative care

- Focuses on improving the quality of life for a person of any age with serious health-related suffering due to illness
- Addresses physical, psychological, spiritual, and social distress
- Respects the wishes and goals of the ill person
- Provides support to families of people with life-limiting illness
- Affirms life and recognizes death as a natural process
- May be given along with disease modifying medical care whenever needed

Medical interventions to manage pain and physical distress that may occur during the dying process

Medication to relieve **pain**, **anxiety** and **shortness of breath**

- Over the counter non-steroid anti-inflammatory medicine such as ibuprofen and acetaminophen
- Mild opioid medicine such as hydrocodone
- Strong opioid medicine such as morphine or fentanyl
- Anti-anxiety and muscle relaxing medicines

Benefits and *side effects* of end-of-life medical procedures

Mechanical ventilation helps a person when they are unable to breathe

- *A person on a ventilator is unable to talk*
- *Frequent tracheal suctioning may be required*

Cardiopulmonary resuscitation restores heart function after it stops beating

- *CPR is not expected to significantly prolong life of someone with terminal illness*
- *Brain function may be diminished after CPR*
- *Severe injury is likely if CPR is done on a frail person*
- *CPR is usually followed by intubation and mechanical ventilation*

Benefits and *side effects* of end-of-life medical procedures

Renal dialysis filters the blood to eliminate toxins when the kidneys have failed

- *Usually lasts 3-4 hours 2-3 times every week*

Enteral nutrition provides nutrition through a tube into the stomach; **intravenous infusion** provides fluids and/or nutrition directly into a vein

- *A feeding tube through the nose is uncomfortable; tubes inserted directly into the stomach or into a vein are subject to infection*

- *Hunger and thirst are issues for caregivers, but not for the dying person*

Be prepared to use, and the teach the family to use, a pain rating scale to assess and document level of pain

Pain is whatever a person says it is and occurs whenever a person says it does

It is usually possible to eliminate or significantly reduce the amount of pain experienced by a dying person

A dying person may choose to tolerate pain in order to remain alert and aware

Addiction to opioids is not expected to occur when given for severe pain

Over time, tolerance to opioid medicine is likely to occur requiring higher doses to achieve the same effect

Be prepared to use, and the teach the family to use, a pain rating scale to assess and document level of pain

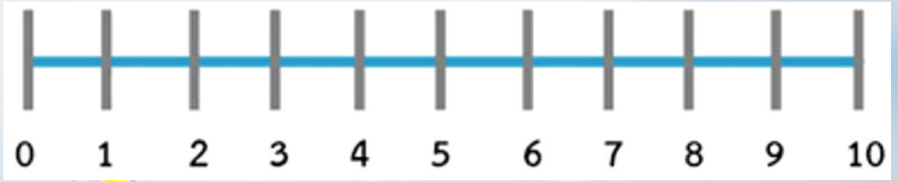
Pain is whatever a person says it is and occurs whenever a person says it does

Pain medicine should be given by the caregiver when the person asks for it

Delay in giving pain medicine allows pain to get worse

We can use a pain rating scale to determine a person's level of pain

Ask the question, "Where are you on a scale of 1 to 10 where 1 is no pain and 10 is the worst pain imaginable ?"



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We can use a pain rating scale to determine a person's level of pain

Ask the question, "Which face shows how you feel about pain you have now ? "

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Pain medicine should be given when the person asks for it; delay allows pain to get worse

For a person who cannot communicate level of pain, look for

- Restlessness, fidgeting
- Tense, rigid muscles of face or body, gritting teeth
- Strained or sad facial expressions, moaning or tearing
- Shortness of breath

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Pain medicine should be given when the person asks for it; delay allows pain to get worse

What should *you* do if your hospice client tells you s/he is having pain, or if you suspect s/he is having pain?

Inform the caregiver as soon as possible

If the pain is not alleviated,

Report your observation to the Pine Tree Hospice staff

Identify ways a volunteer can provide comfort to a person in pain or physical distress

Pine Tree Hospice volunteers may not provide physical care

What we *can* do:

- When possible and depending on the client's wishes, distract the client by
  - Reading stories, scripture, etc. aloud
  - Asking the client to share stories with you about his/her life
  - Playing relaxing music or videos
  - Telling stories about interesting events, past or present
  - Your ideas ?

Identify ways a volunteer can provide comfort to a person in pain or physical distress

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What we *can* do:

- Suggest some comfort measures the caregiver can do
  - Repositioning with pillows
  - Mouth care
  - Moving the bed by a window
  - Applying a cool or warm cloth to the client's forehead
  - Your ideas ?

Identify ways a volunteer can provide comfort to a person in pain or physical distress

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What we *can* do:

- Offer the comfort of physical touch by placing your hand under the client's hand, allowing the client to move away easily if s/he does not want to be touched
- Just quietly BE there without the need to talk or do anything