Palliative care and renal medicine

"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."

Palliative Care - WHO definition (2002)

Palliative care and CKD

Much of the emphasis on palliative care has been traditionally focused on people with malignant disease. The Who definition of the palliative care approach is much broader and encompasses the patient faced with chronic disease. The number of elderly and frail patients who present for management by a nephrologist is on the increase. Increasing age and other co morbidities will preclude these patients from transplantation and most certainly they will experience an increased mortality and morbidity and a poor quality of life if dialysis is chosen.

The St George Renal Department has the assistance of Dr Frank Brennan, Palliative Care Consultant to support the unit in the management of end stage renal failure patients.

Renal Pallcare clinic

Renal Palliative Care Clinic operates on the first and third Tuesday of the month from 2pm to 4pm in 4 west clinic area. The clinic is coordinated by Shelley Tranter CNC and is attended by Dr Brennan, the Renal Registrar and the Renal Social Worker. Appointments are allocated 30 minute time slots.

There are four main categories of patients who are referred to the clinic

- 1. Patients who have chosen a not for dialysis pathway or need assistance in decision making around choosing dialysis or not
- 2. Patients who are on dialysis and have cancer or other life -limiting conditions.
- 3. Patients on dialysis who are experiencing symptoms which are difficult to manage
- 4. Patients on dialysis who need assistance in decision making regarding withdrawing or continuing with dialysis

The objective of the registrar's attendance at the clinic is the identification and management of the medical, spiritual and psychosocial issues which are experienced by patients with CKD and their families. Your experience in the clinic will be short so please take the opportunity to ask as many questions as possible.

During your time in the Renal Pallcare Clinic you will be expected to present either a case or a journal review at Thursday meeting. The topic will be chosen in collaboration with Dr Brennan.

End of life pathway

An *end of life pathway* is available as a guide for the management of inpatients in the dying phase of ESRD. The pathway provides the doctor with prompts for management and can be commenced by the treating team before a palliative consult is made.

Resources

Book Reviews

Reviews by Dr Shelley Tranter Clinical Nurse Consultant St George Hospital Renal Department, Sydney

 Brown Edwina, Chambers E. Joanna and Eggeling Celia, series Editor Watson Max. End of Life Care in Nephrology: From advanced disease to bereavement 2007 Oxford University Press New York ISBN 978-0-19-921105-0

End of Life Care in Nephrology is another offering from the experts in the field of palliative care in renal medicine from the United Kingdom. The handbook has evolved from a previous collaborative book - Supportive Care for the Renal Patient edited by Brown and Chambers, which has been reviewed previously in this journal. Edwina Brown is Honorary Professor of Renal Medicine, Imperial College London and Dr Jo Chambers is a consultant in palliative care at North Bristol NHS Trust. Dr Celia Eggeling is a renal counsellor. All three have contributed regularly to literature in the field of renal palliative medicine including contributions to the recently released End of Life Care in Advanced Kidney Disease Framework for the NHS.

Palliative care in renal disease has gained widespread interest in a time when there is a large growth in patient numbers, the majority of whom are sicker and elderly. Additionally, chronic kidney disease and predialysis nurses have identified the need to support patients who do not choose the dialysis pathway or require assistance in their decision making.

The handbook is a comprehensive guide to the management of patients with CKD at the end of life and a ready reckoner on symptom management. It is handbook size and very easy to read. Through out the handbook case histories are used to illustrate management in practice and space has been left for the reader to include personal notes.

The opening chapters set the scene by giving a brief overview of CKD including prevalence and common causes and sequelae. The context is the United Kingdom and this is the only drawback of this book. Not withstanding, the context is fairly congruent with our Australian and New Zealand experiences.

Subsequent chapters discuss the major co morbidities of CKD and highlight the effects of co morbidities on mortality, morbidly and quality of life. There are chapters which address the common complications, symptoms and causes of death in the UK CKD group. The final chapters introduce the reader to ethical and legal considerations, spiritual and religious care and discussions on methods of approaching difficult conversations with patients and families.

End of life care is not just a role for a palliative care professional and all members of the renal team need to be cognisant of ways they can assist patients and families during this difficult time.

In summary *End of Life Care in Nephrology* provides a detailed and collaborative approach to the palliative and supportive care of patients with CKD and would be a valuable reference book for all renal health professionals.

2. Supportive Care for the Renal Patient Edited by E. Joanna Chambers, Michael Germain and Edwina Brown. Oxford University Press.

Supportive Care for the Renal Patient is one in a series of supportive care textbooks. The text provides the renal professional with much needed information on the care of the patient with renal failure from a different perspective. The editors bring together a number of experts in the field of supportive and palliative care.

Dr Alvin Moss introduces the nine recommended guidelines with regard to decision making about withholding or withdrawing dialysis and the care of patients who are not appropriate for dialysis. These guidelines and a process for ethical decision making provide the basis for the ethics case analysis presented throughout the book. The text is divided into 15 chapters. Chapter titles include initiation and withdrawal of dialysis, the concept of supportive care for the renal patient, planning a palliative care program; health related quality of life in chronic renal failure and symptoms of renal disease and their management. One symptom we often struggle with is pain and a chapter is dedicated entirely to the management of pain in renal failure. Chapters on the psychological and spiritual care of patients guide the health care professional toward a more holistic approach as we journey with the patient and family. This journey is often long and must involve a multidisciplinary approach. The emphasis is on a continuum of palliative care intervention from diagnosis through to end of life care.

This must have text was published in 2004 but I was only made aware of it by our palliative care consultant who purchased a copy while on a conference overseas. My shelves are full of renal textbooks and I had been meaning to stretch my imagination beyond the usual nursing care of the dialysis patient and this book has filled the gap. As A clinical nurse consultant, I have begun to realise that most of my clinical work is not what it used to be – teaching nurses to do dialysis. I am still involved in trouble shooting difficult dialysis problems but now the emphasis is more on supporting nurses, patients and families in quality of life and end of life issues.

The book is invaluable for all members of the multidisciplinary team involved in the care of patients requiring renal replacement therapy. The text is also an asset for planning care for the patient managed on a conservative pathway. Keeping patients alive in end stage renal failure is no longer a problem but supporting patients in achieving an optimum quality of life and a peaceful supported end of life is the new challenge.

NB new edition due late 2009

• Both books are available for loan from Renal CNC

eLibrarv

An eLibrary has been developed to inform and guide you

- General palliative care and renal failure
- Guidelines
- End of life pathway
- Drug guidelines
- Symptoms
 - o Pain
 - o Pruritus
 - Restless legs
 - other
- Advance care planning