



Palliative care focuses on providing relief from distressing symptoms when the disease is no longer curable. Since the focus of support care is on providing comfort, the role of active medical investigations and treatments are limited. Psychological and spiritual elements of care will be given added focus at this time. All treatments will be geared toward comfort measures and every effort will be made to alleviate pain and other distressing symptoms. We believe that advanced and terminal phases of illness can still provide opportunities for existential hope and personal growth.

Tests

Most people have extensive investigations of their disease prior to coming to the hospice and further investigations will not alter the course of the illness. If tests are done, they are often quite simple, for example, a blood test to monitor levels of an anticonvulsant drug, or a urine test to rule out treatable bladder infection. Tests to investigate the illness for the most part are no longer useful in managing problems and can often be quite uncomfortable and intrusive to one in the advanced stages of illness.

Treatments

Interventions such as cardiopulmonary resuscitation are not done at the hospice and ventilators are not used. Intravenous medications are not commonly used since most palliative medications can be given by a more comfortable route. If desired, alternative medications may be taken by mouth and administered by family members. On rare occasions blood transfusions may be given only to alleviate distressing symptoms.

Nutrition and Hydration

Decreased nutritional intake is a very common component of advanced illness. It is often a great source of concern for families but rarely for the person affected. People commonly feel it is necessary to encourage the dying person to eat in the hope of sustaining life. Rather, promoting food for comfort if the person wishes is more appropriate at this stage of illness. Intravenous fluids are not commonly used since in many situations artificial hydration is neither necessary nor helpful to the resident.

Support Services

Helping residents to cope with the fears and losses that accompany advanced illness is a care priority in the hospice program. The palliative care team is comprised of professionals who are able to help you and your family in different ways. The team includes nurses, doctors, social workers, physiotherapists, occupational therapists and chaplains. Trained volunteers are available and will provide a range of support to residents and their families.