

What is Palliaive Care and Symptoms Assessment and Management of Children?

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DESCRIPTION

Palliative care is a multidisciplinary approach to medical care that aims to improve people's quality of life and lessen their suffering when they have serious, complicated, and often terminal illnesses. The WHO now takes a more expansive approach, recommending that the principles of palliative care should be applied as soon as possible to any chronic and ultimately fatal illness. Palliative care is appropriate for people of all ages with serious illnesses and can be provided alone or in conjunction with curative treatment. It is provided by a multidisciplinary team that may include chaplains, dietitians, psychologists, social workers, occupational and physical therapists, and nurses. Palliative care can be provided in hospitals, outpatient facilities, skilled nursing facilities, and homes. Palliative care is an important part of end-of-life care, but it's not just for people who are nearing death. The effectiveness of a palliative care strategy in enhancing a person's quality of life is supported by evidence. The improvement of the quality of life for people who have chronic illnesses is the primary goal of palliative care. Palliative care is usually given to people at the end of their lives, but it can help people of any age or stage of critical illness. Through pain and symptom management, the identification and support of caregiver needs, and care coordination, the overall goal of palliative care is to improve the quality of life of people with serious illnesses, any life-threatening condition that either reduces an individual's daily function or quality of life or increases the burden on their caregivers. Palliative care is not just for people receiving end-of-life care; it can be provided at any stage of illness alongside other treatments that aim to cure or extend a person's life. In the past, patients with incurable cancer were the primary focus of palliative care services; however, this framework is now utilized for patients with severe heart failure, chronic obstructive pulmonary disease, multiple sclerosis, and other neurodegenerative conditions. Initiation of palliative care can take place at home, in a hospital, in a hospice, or in an emergency room. Palliative care should be initiated at the time of diagnosis or when disease-directed options would not improve a patient's prognosis for some severe disease processes, according to medical specialty professional organizations. Within eight weeks of being diagnosed, advanced cancer patients should be "referred to interdisciplinary palliative care teams that provide inpatient and outpatient care early in the course of disease, alongside active treatment of their cancer," as stated by the American Society of Clinical Oncology.

CONCLUSION

The Edmonton Symptom Assessment Scale (ESAS) is one instrument used in palliative care. It is made up of eight visual analog scales (VAS) that range from 0 to 10, and it measures levels of pain, activity, nausea, depression, anxiety, drowsiness, appetite, a sense of well-being, and sometimes shortness of breath. A score of 0 indicates that the symptom is not present, and a score of 10 indicates that it is of the utmost severity. The instrument can be used by the patient, with or without assistance, as well as by nurses and family members. Based on established practices and varying degrees of evidence, medications used in palliative care.

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CONFLICT OF INTEREST

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