



Media Release

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Palliative Care Benefits Australians with Chronic Illnesses

Although two thirds of Australians say they *would* be likely to ask for palliative care for someone close to them who had a serious, prolonged or terminal illness, there is also a high proportion of people who do not understand *when* palliative care can be accessed.

A national survey, released to mark National Palliative Care Week (22-28 May), highlights the confusion many Australians have around palliative care said Palliative Care Australia CEO, Liz Callaghan.

“Palliative care has an important role for people needing symptom control in their last weeks of life, but palliative care can also enrich quality of life for many years before someone dies,” Ms Callaghan said.

Two thirds of respondents did not know that palliative care can be accessed by people who have developed advanced complex chronic disease, such as heart disease, dementia or Alzheimer’s, cancer, chronic obstructive pulmonary disease and kidney disease. These diseases represent the five leading causes of death according to the Australian Institute of Health and Welfare.

“This year, National Palliative Care Week is focussed on ‘Living Well with Chronic Illness’ to remind people that palliative care helps people to live as well as possible, sometimes for many years before they die. Palliative care identifies and treats symptoms which may be physical, emotional, spiritual or social,” Ms Callaghan said.

Lung Foundation Australia CEO Heather Allan echoes the need for patients and doctors to be talking about palliative care sooner rather than later.

“We advocate strongly that patients and clinicians should be raising the subject of supportive and palliative care as early in the disease journey as possible. Sometimes it is easier to raise it when the patient is coping with the disease, so the conversation can be clear and less emotional,” Mrs Allan said.

Motor Neurone Disease Australia National Executive Director Carol Birks said while the average life expectancy for someone with motor neurone disease is two-and-a-half years, some people may live six months and others six years or more, so it is important to start discussions about end-of-life care soon after diagnosis.

“For people with motor neurone disease, we promote early referral to palliative care and early discussion about future care options. It is particularly important to start conversations about end-of-life care preferences before people lose their ability to speak,” Ms Birks

Ms Callaghan said PCA had developed the Dying to Talk Discussion Starter, which provides a step-by-step guide with activities to help people talk about their end-of-life care wishes.

“The Dying to Talk Discussion Starter helps people to start the conversation with their loved ones and health professionals,” Ms Callaghan said.

The Dying to Talk Discussion Starter is available from www.dyingtotalk.org.au

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