The PPRISM clinic for non-cancer palliative care and symptom management: Addressing the needs of patients with cirrhosis

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Background & Aim: Efforts are being focused on integrating palliative principles at the earlier stages of disease, and to create outpatient programs to focus on this type of integrated care.

Methods: To serve patients with cirrhosis, a non-cancer outpatient Palliative Care Clinic was formed and referral criteria were developed to make an attempt to capture patients in the last 6 months of life. ESAS-r (Edmonton system assessment scale) was attained for all the patients at each clinic visit. Data regarding their medication changes, goals of care, and stage of their disease, ER visits and hospitalizations were also recorded.

Results: In the outpatient clinic during 2013-2015, significant symptoms (score of 4 or more/10) were as follows: 70% pain, 90% fatigue, 60% drowsiness, 70% lack of appetite, 60% nausea, 40% shortness of breath, 30% depression and 40% anxiety. Patients had both compensated and de-compensated disease. KPS (Karnofsky Performance Status) average was over 60%, however, the death rate (30%) was high.

Conclusions: Analysis of the complete patient data for the initial 35 cirrhosis patients of the PPRISM clinic will be presented including information regarding referral success for various patient populations, symptom burden, goals of care documentation and follow up needs in this patient population. This study will guide future outpatient clinics by enhancing goals of care and advance care planning integration, patient and family involvement in health, and symptom care protocols for patients living with cirrhosis. A more detailed look at this data may also help future clinics to decide interdisciplinary needs of outpatients living with chronic illness.

Biography
Amanda J Brisebois is an Internal Medicine and Palliative Care Specialist from Edmonton, Alberta, Canada. She has been practicing for 17 years, and has been focusing on the Integration of Palliative Care Principles in care of patients with chronic illness for the past 5 years. She is the current Facility Chief of Medicine at the Grey Nuns Hospital and also an Associate Clinical Professor at the University of Alberta. She has won numerous teaching awards, as well as grants to undertake her current work.

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