

2<sup>nd</sup> Global Congress on

# Hospice & Palliative Care

September 29-30, 2016 Toronto, Canada

## PALLIATIVE CARE IN CHRONIC OBSTRUCTIVE PULMONARY DISEASE: THE CASE FOR EARLY INTEGRATION

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Chronic Obstructive Pulmonary Disease (COPD) is the only major worldwide cause of mortality increasing in prevalence. Furthermore, COPD is currently incurable, with oxygen being the only therapy shown to have a mortality benefit. Compared to patients with cancer, patients with COPD experience similar levels of pain, breathlessness, fatigue, depression, anxiety, and have a worse quality of life, but have comparatively little access to palliative care. When these patients do receive palliative care, they tend to be referred later than do patients with cancer. Many disease-, patient-, and provider-related factors contribute to this phenomenon, including COPD's unpredictable course, misperceptions of palliative care among patients and physicians, and lack of Advance Care Planning (ACP) discussions outside of crisis situations. An integrated palliative care approach would introduce palliative treatments alongside, rather than at the exclusion of, disease-modifying interventions. This approach has the potential to address many of the barriers to palliative care in these patients.

### Biography

Lilly is a second-year resident in the Department of Family Medicine at the Schulich School of Medicine and Dentistry at Western University in London, Canada. He has a strong interest in Palliative Care and Oncology, and hopes to pursue additional training in Palliative Care after completing his Family Medicine residency. He has previously conducted research on the hidden curriculum in medical education, and is currently investigating the attitudes toward Palliative Care and Medical Aid in Dying among family physicians in Southwestern Ontario. Lilly also has an interest in the role of medical humanities play in the provision of quality palliative care, and plans to be involved in medical education after completing his post-graduate training.

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