

How does palliative care fit with treatment?

Palliative care does not replace your treatment; it works with your treatment to prevent and ease suffering and to improve your quality of life.

Who provides palliative care?

A family doctor or nurse practitioner is primarily responsible for providing palliative care. Other people may be involved, such as specialists, nurses and hospice volunteers.

Why are goals of care important?

Establishing your goals of care enables care providers to align your care and treatment with what is most important to you. This can improve your quality of life and death.



EARLY PALLIATIVE CARE BENEFITS

Do you need help deciding if palliative care is for you? Take the palliative care test!

Do you, or someone close to you, have a life-threatening illness and...

- have symptoms that impact your activity level or quality of life?**
- experience any difficult side effects from treatment?**
- need help making medical decisions about treatment options?**
- need help coping with the stress of a life-threatening illness?**

If you answer yes to any of these questions, palliative care might be helpful.

Contact your family doctor, nurse practitioner, or other health care provider to talk about this.

Resources:

- **prhospice.org**
Local hospice palliative care resource
- **theconversationproject.org**
Support to talk about end-of-life wishes
- **nidus.ca**
Personal planning resources

Powell River
Division of Family Practice
A GPSC Initiative

SharedCare
Partners for Patients

PALLIATIVE CARE support

It's ALL about life!



What is ALL Care Support?

ALL Care Support is a campaign about life! It aims to change the perception that palliative care is only appropriate near death.

Palliative care **improves the quality of life** of patients and their caregivers facing a life-threatening illness. It focuses on the **prevention and relief of suffering** by early assessment and treatment of pain and problems: physical, emotional, and spiritual. It intends neither to speed up nor delay death.

Palliative care can be broken down into **supportive care** and **hospice palliative care**. Supportive care is received early after diagnosis and can be provided at the same time as other treatments. Hospice palliative care is received at the end of life.

Goals of care are decisions and plans about your care and treatment based on your desires and fears for the future.

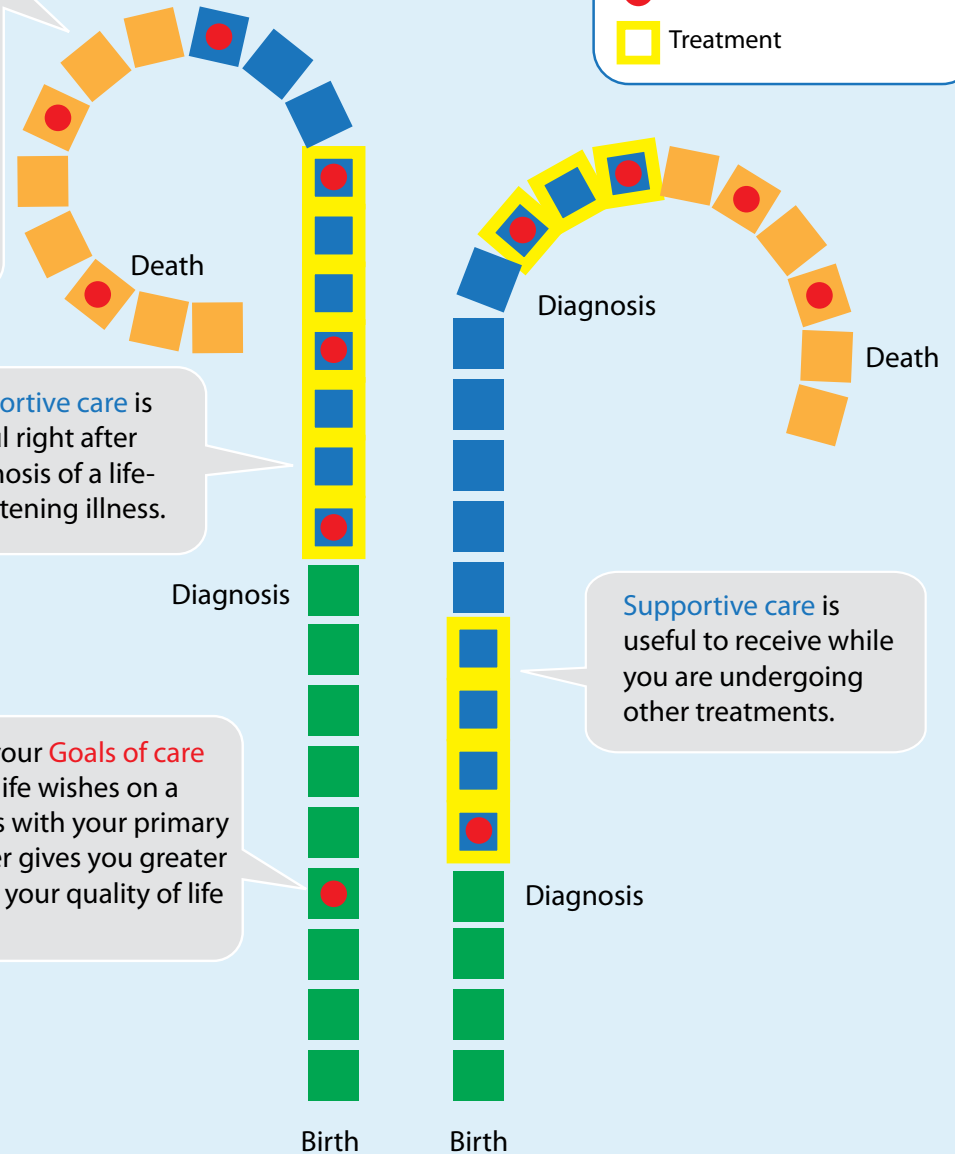
The journey of living with a **life-threatening illness** is different for everyone. Below are two examples how palliative care is appropriate right after diagnosis and at all stages of a life-threatening illness.

Hospice palliative care is provided at the end of life and also provides bereavement support after death. At this stage, life-prolonging treatment has stopped.

Supportive care is useful right after diagnosis of a life-threatening illness.

Discussing your **Goals of care** and end-of-life wishes on a regular basis with your primary care provider gives you greater control over your quality of life and death.

- Supportive care
- Hospice palliative care
- Goals of care
- Treatment



TWO LIFE JOURNEYS