

M10.2

Palliative and/or End-of-life Care for Patients with Advanced Chronic Obstructive Pulmonary Disease

09:00 Room 428

Models and Local Programmes of Palliative Care for Patients with Advanced Chronic Obstructive Pulmonary Disease

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Chronic obstructive pulmonary disease (COPD) is a leading cause of mortality and morbidity worldwide. People with advanced COPD have obvious palliative care needs. Their quality of life is compromised due to refractory and disabling dyspnoea as well as psychosocial impact from the disease. They have poor functional status which goes through a slow relentless decline, punctuated with unpredictable life-threatening exacerbations, reflecting the difficulty in prognostication and the importance of early advance care planning (ACP). However, in a retrospective study comparing non-cancer and cancer deaths in Hong Kong (Lau KS et al., 2010), only 3.6% of COPD patients ever received palliative care before death, compared with 79.2% of cancer patients. The same study found that in two weeks before death, only around 35% of COPD patients ever had ACP documentation in medical record, while such documentation could be identified in more than 60% of cancer patients.

A comprehensive care for patients with advanced COPD should include personalised disease-specific management and pulmonary rehabilitation, and should integrate palliative care, which also emphasises early support to family and covers the care at the end of life. Such care model requires expertise from both respiratory and palliative medicine, as well as concerted effort of an interdisciplinary team. Since 2010, palliative care programmes for non-cancer patients have been developed in different Hospital Authority hospitals, including some specifically targeted patients with advanced respiratory diseases. In this presentation, overseas care models for patients with advanced COPD would be discussed. There is also sharing on local palliative care programmes and the experience on use of opioids for dyspnoea, community support and advance care planning in this group of patients.