

# Palliative care principles can ease COVID-19 challenges

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Yale School of Nursing faculty members Dena Schulman-Green, Ph.D. (left) and Shelli Feder, Ph.D., APRN, NP-BC, ACHPN (center) recently partnered with Kathleen M. Akgün, MD, MS (right) from Yale School of Medicine to publish a set of palliative care strategies clinicians can use while fighting the COVID-19 (coronavirus disease) virus.

Even though [social distancing](#) prevents [healthcare workers](#) from implementing a full suite of palliative care measures, Schulman-Green, Feder, and Akgün advocate for using these principles whenever possible.

## Alleviate Symptoms

Beyond the preservation of life and function, reducing burdensome symptoms is a key component of the care for COVID-19 patients. Here, palliative care strategies for symptomatic management have an important role.

"There are many pharmacological and non-pharmacological tools clinicians can use to ease symptoms," Feder said. "For example, clinicians

may consider the judicious use of opioids for patient breathlessness or sipping broth or water for patients who experience a loss of smell or taste."

## Provide Patient-Centered Care

Patient isolation, staffing levels, and limited visitation policies all complicate how best to provide this type of care, especially for patients on ventilators. Schulman-Green, Feder, and Akgün recommend supporting patients and their families with empathetic statements that acknowledge why their preferences may be unavailable and acknowledge the fundamental dignity of each patient. When in-person interaction is not possible, [communication technology](#) can bridge the divide between patients and their families. Video or voice communications also allow providers to address a family's routine questions and discuss important decisions about the patient's care.

## Care for Patients and Families

Resources like VitalTalk provide clinicians with scripted language for these difficult conversations.

"In addition to using technology to enhance patient-family communications and allow for high-quality family engagement during medical decision making, it is essential that clinicians have empathic language prepared in advance," said Akgün, who is currently serving on the front lines with COVID-19 patients at Veterans Affairs in West Haven, CT. "The volume and complexity of patients who are battling COVID-19, and the precautions required for providers to minimize their own risk of contracting the disease, led to us realizing we don't have nearly as much time with patients as we would like. It is helpful to the patient and the family for us to acknowledge the strains of isolation and to have practiced these discussions using empathic communication strategies, even if from a distance."

Telemedicine can be especially helpful in this area,

bringing in palliative care specialists or other team members who cannot be physically present.

**More information:** Shelli Feder et al. Palliative care strategies offer guidance to clinicians and comfort for COVID-19 patient and families, *Heart & Lung* (2020). [DOI: 10.1016/j.hrtlng.2020.04.001](https://doi.org/10.1016/j.hrtlng.2020.04.001)

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