

Supportive Care & Living Well with Parkinson's

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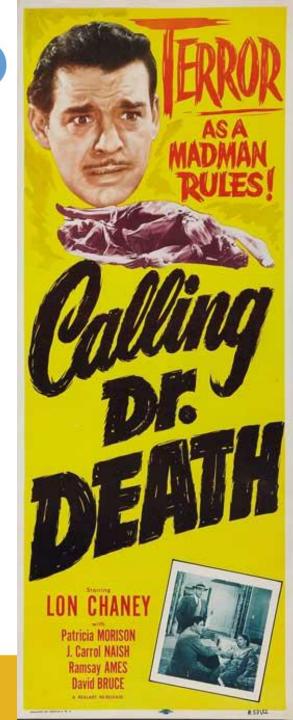
Defining Terms

What is supportive care? Palliative Care? Hospice?



Palliative Care is NOT

- Palliative care includes but is not the same as hospice
- Euthanasia or Death Squads
- Giving up on patients
- Only for the imminently dying
- Only for patients with cancer
- Only for palliative care specialists

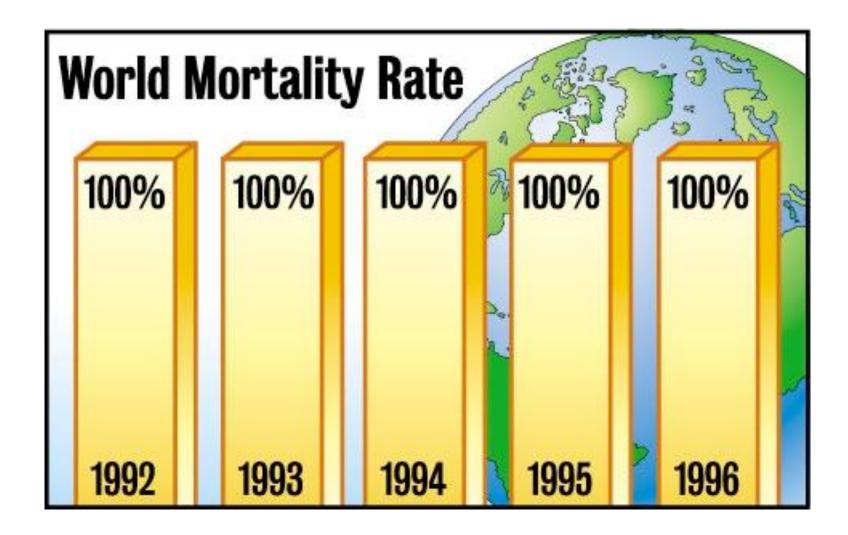




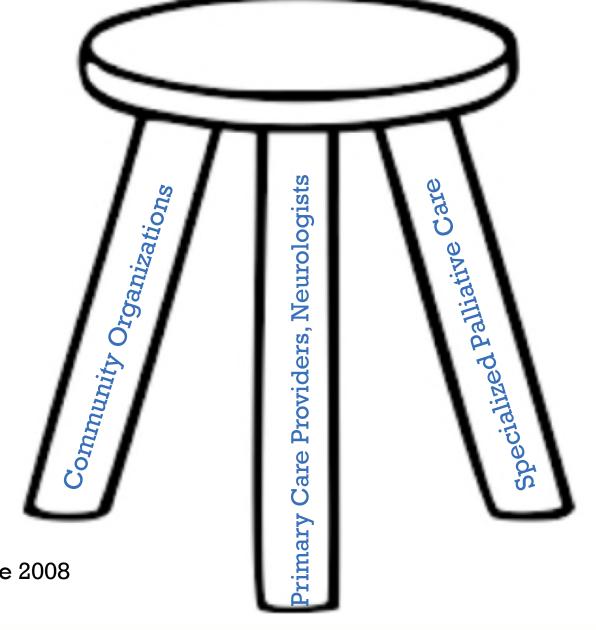
Palliative and Supportive Care Defined

- Primary goal is to improve quality of life and relieve suffering for patients and their families
- Includes control of pain and other hard to control physical symptoms
- Also addresses psychological, social, and spiritual issues
- Palliative care affirms and supports life while addressing death and decline as a normal and expected process





Palliative Care as a System: The 3-Legged Stool



Developed by Kirk Hall, living with Parkinson's since 2008



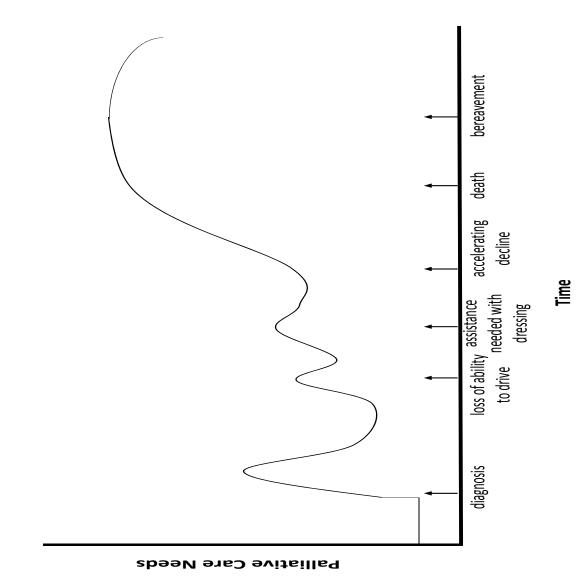
Hospice

- Palliative care for persons nearing the end of life (defined as 6 months by Medicare) – you can (and might) live longer
- 90% of hospice is at home and it is covered by Medicare, Medicaid and other insurances
- Goals of hospice are to keep people at home and comfortable
- Services provided by hospice include medical support, social work chaplain, medical equipment and other services

When is the rig



Figure 1: Continuum of Palliative Care





Finding Opportunities for Love, Joy, Meaning and Connection

What are goals of care?

What is Person vs. Patient vs. Disease-centered Care?



Are you an illness, a patient or a person?

- In palliative care, we take care of <u>people</u>, not illnesses.
- How do you define yourself:
 - Values
 - Connections
 - Activities
 - Gifts and skills
- How do you want to be seen?
- What is essential and untouchable?
- Finding wholeness versus returning to normal



Goals of Care should inform Plans of Care

- What do you enjoy?
- What are you looking forward to?
- Where do you find meaning?
- Where do you find joy?
- Who do you love?
- How do you find peace?
- What are you afraid of?
- What is the hardest part of having Parkinson's?



every victory counts ®





Opportunities for Joy

- Meaning
- Connection
- Simple Pleasures
 - Food
 - Touch
 - Music
 - Nature



Addressing Sources of Suffering

Palliative approach to symptom management

Working with challenges to emotional and spiritual wellbeing



Symptom Management

- Pain, fatigue, depression, memory loss, apathy
- Can we find ways to reduce these symptoms?
- Can we reduce the impact of these symptoms by focusing on function?
- Can we find ways to live (not just survive) despite these symptoms by creating shared goals and dropping unrealistic expectations?
- Can we find ways to cope better with these symptoms?



Difficult Emotions

- Grief, guilt, worries, hopelessness, loneliness
- We can NURSE these difficult emotions
- Naming
- <u>U</u>nderstanding
- Respecting
- <u>Supporting</u>
- <u>Exploring</u>



Spiritual Challenges

- Spirituality refers to how you find meaning, connection, choice and stillness
- Parkinson's may challenge one's faith, hope, courage, identity, relationships and sense of self
- Spiritual practices can be a source of strength, courage, patience and resilience



Real vs. False Hope

- Hope is critical to avoid demoralization
- False hope can cause one to make bad decisions and waste precious time and other resources
- Real hope helps one to focus on what's most important and on real choices in the here and now



Planning and Preparing for the Future

Developing a Road Map for the Parkinson's journey



Moving Beyond "Everyone is Different"

- Simply knowing that everyone with Parkinson's has a different journey is not very helpful
- Many people want a road map:
 - Where am I on the journey?
 - What do I need to watch out for?
 - What does the end of the road look like?



Road Signs

- These depend on where you are on the map
- Early on one may be watching for signs that they should retire, consider DBS, start Parkinson's medication
- In the middle stages, signs may include problems with memory, balance or activities of daily living
- In advanced disease, patients and families may need guidance on whether to get outside help, go to a nursing home and when to start hospice



Advance Care Planning

- This is an active conversation between patients, families and healthcare providers
- Includes:
 - Power of attorney
 - Advance directives
 - Anticipatory guidance
 - Goals of care



Power of Attorney and Advance Directives

- Who do you want (or not want) to make decisions for you if you cannot do this for yourself?
- Do you want CPR?
- Do you want aggressive interventions?
- Do you want to avoid interventions not likely to improve your quality of life?
- Do you want to avoid hospitals?



Summary and Action Items



Action Items

- Make a bucket list
- Get in touch with your spiritual self
- Write down opportunities for joy
- Talk to your family about your wishes now and in the future
- Complete a power of attorney and advance directives