

Importance of Palliative Care in Cancer: Indian Scenario

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Abstract

The cancer treatment is at present based on chemotherapy and radiotherapy. Both these treatments have lots of side effects including severe pain to the patients. Thus, importance of palliative care to the cancer patients is more needed for management of cancer. As per the World Health Organization definition the Palliative care is an approach that improves the quality of life of patients and their families facing the problem associated with life-threatening illness, through the prevention and relief of suffering by means of early identification, assessment and treatment of pain and other problems, physical, psychosocial and spiritual. Some of the objectives of Palliative care are provides relief from pain and other distressing symptoms; affirms life and regards dying as a normal process; intends neither to hasten or postpone death; integrates the psychological and spiritual aspects of patient care; offers a support system to help patients live as actively as possible until death; help the family cope during the patient's illness and in their own betterment. The review study reveals that there is need for increase of palliative care in India. The palliative care at present is about 1-2% of total patients suffering from cancer which need to be increased to maximum patients. A case study did by Ankit Chandra (2016) stated that the palliative care can be increased by awareness among the public. Here role of Institution engaged in Science Communication and Healthcare like ICMR, Vigyan Prasar, NISCAIR-CSIR become more important for carrying out mass awareness towards this social issue of palliative care.

Keywords: Palliative Care; Treatment; Cancer; India.

Introduction

In the past few decades, there is a slow and constant increase in numbers of cancer patients observed in India. The cancer term is not new in society and defined as the abnormal growth of cells with or without spreading capacity to other parts of the body. The increase in numbers of cancer in India mainly depends on the use of chemicals in the fields during sowing of various crops. This can be ascertained that there is a rise in numbers of patients

in Punjab state which is famous for the production of wheat and related crops. Recently published news in down to earth magazine regarding survey done by the Punjab Government indicates that there are at least 90 cancer patients for every 100,000 population in Punjab. This is also observed that the incidence of cancer in Punjab is higher than the national average of 80 per 100,000 populations. The study was performed by door-to-door survey¹. Every state and thus the whole country facing a slow rise in cancer patients. The cancer treatment is at present based on chemotherapy and radiotherapy. Both these treatments have lots of side effects including severe pain to the patients. The cancer patients thus need palliative care. As per the World Health Organization definition the Palliative care is an approach that improves the quality of life of patients and their families facing the problem associated with

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life-threatening illness, through the prevention and relief of suffering by means of early identification and impeccable assessment and treatment of pain and other problems, physical, psychosocial and spiritual.

Some of the objectives of Palliative care are

To provides relief from pain and other distressing symptoms;

To affirms life and regards dying as a normal process;

To intends neither to hasten nor postpone death;

To integrates the psychological and spiritual aspects of patient care;

To offers a support system to help patients live as actively as possible until death;

To help the family cope during the patient's illness and in their bereavement [2].

The government of India role

The Government of India through Directorate General of Health Services started a centrally sponsored scheme the funding pattern for the palliative care. In the said scheme 40% share will be shared by states except for North-Eastern states of India. For which 10% in case of NE and Hill states [3].

Palliative care is also known as supportive care which is required in the terminal cases of Cancer, AIDS etc. and can be provided relatively simply and inexpensively. Effective palliative care requires a broad multi-corrective approach that includes the family and makes use of available community resources. It can be provided in tertiary care facilities, in community health centres and even in patients' homes. The Ministry of Health & Family Welfare, Government of India, constituted an expert group on Palliative care which submitted its report 'Proposal of Strategies for Palliative Care in India' in November 2012. No separate budget is allocated for the implementation of the National Palliative Care Program. However, the Palliative Care is part of the 'Mission Flexipool' under National Health Mission (NHM).

A model PIP, a framework of operational and financial guidelines, for the states has been designed. By a model PIP, the states/UTs may prepare their proposals related with Palliative Care

and incorporate them in their respective PIPs to seek financial support under NHM.

A process to avail

By a model PIP (Guidelines), the states/UTs may prepare their proposals related with Palliative Care and incorporate them in their respective PIPs to seek financial support under NHM.

Goal: Availability and accessibility of rational, quality pain relief and palliative care to the needy, as an integral part of Health Care at all levels, in alignment with the community requirements.

Objectives

1. Improve the capacity to provide palliative care service delivery within government health programs such as the National Program for Prevention and Control of Cancer, Cardiovascular Disease, Diabetes, and Stroke; National Program for Health Care of the Elderly; the National AIDS Control Program; and the National Rural Health Mission.

2. Refine the legal and regulatory systems and support implementation to ensure access and availability of Opioids for medical and scientific use while maintaining measure for preventing diversion and misuse

3. Encourage attitudinal shifts amongst healthcare professionals by strengthening and incorporating principles of long term care and palliative care into the educational curricula (of medical, nursing, pharmacy and social work courses).

4. Promote behaviour change in the community through increasing public awareness and improved skills and knowledge regarding pain relief and palliative care leading to community-owned initiatives supporting health care system.

5. Develop national standards for palliative care services and continuously evolve the design and implementation of the National program to ensure progress towards the vision of the program.

Implementation mechanism

It is envisaged that activities would be initiated through the National Program for prevention and control of cancer, CVD, Diabetes & Stroke. The

integration of national programs is being attempted under the common umbrella for synergistic activities.

Thus, strategies proposed will provide essential funding to build capacity within the key health programs for non-communicable disease, including cancer, HIV/AIDS, and efforts targeting elderly populations. Working across ministries of health and finance, the program will also ensure that the national law and regulations allow for access to the medical and scientific use of Opioids.

The regulatory aspects, as mentioned in the Program, for increasing Morphine availability would be addressed by the Department of Revenue in coordination with the Central Drug Standards Control Organization. Cooperation of international and national agencies in the field of palliative care would be taken for successful implementation of the program.

The major strategies proposed are the provision of funds for establishing state palliative care cell and palliative care services at the district hospital.

Non-Government Organizations engaged in palliative care:

The large NGO in the Palliative care working in India is Pallium India. Pallium India is a charitable trust registered under the Societies Registration Act (no. 693/2003/IV). Pallium India is authorized by Government of India to receive Foreign Donations under the Foreign Contribution Regulation Act. (FCRA). It is a national registered charitable trust formed in 2003 with the following vision and mission: An India in which palliative care is integrated into all health care so that every person has access to effective pain relief and quality palliative care along with disease-specific treatment and across the continuum of care. To catalyze the development of effective pain relief and quality palliative care services and their integration in health care across India through delivery of services, education, building capacities, policy, research, advocacy and information.

Current scenario of Palliative care in India:

With reference to the review by Rajagopal (2015), there is less than 1% of India's population has access to palliative care. The efforts by various organizations engaged in palliative care over the

last quarter of a century have resulted in progress. In Kerala, this has 3% of India's population but has maximum percentage of palliative care to the patients. The credit for this work is to NGO's charitable activity.

The year 2014 saw the landmark action by the Indian Parliament, amended India's infamous Narcotic Drugs and Psychotropic Substances Act, thus overcoming many of the legal barriers to opioid access. Education of professionals and public awareness are now seen to be the most significant needs for improving access to palliative care in India [4].

Ayushman Bharat – Pradhan Mantri Jan Arogya Yojana (PM-JAY) was launched by Hon'ble Prime Minister on September 23, 2018. PM-JAY will provide a cover of up to Rs.5 lakh per family per year for health care- secondary and tertiary care hospitalization. The scheme will be benefits to over 10.74 crore vulnerable families. The scheme will be available in cashless and paperless manner at both public and empanelled private hospitals. It is the World's largest healthcare scheme and critically dependent on effective communication that should reach the last mile beneficiary. It is not only important to communicate the features of the scheme to the beneficiaries, but it is also important to keep them updated on the processes involved in availing the benefits. A strong community outreach at State level is key for ensuring effective implementation of PM-JAY. In this journey towards achieving universal health coverage, it is important to keep the general audience continuously updated about various milestones of PM-JAY. The role of communication is also to alert people of misleading information about the scheme and communicate correct information effectively [5].

International Scenario of Palliative care

During a meeting held in Liverpool, UK, November 2013, for the care for the dying. The representatives engaged in care works the from 12 countries participated. The group had been working together for a number of years with a shared focus on the Liverpool Care Pathway for the Dying Patient (LCP) International Continuous Quality Improvement Programme [6].

Conclusion

Palliative care is new in Healthcare. Availability of palliative care to more numbers of Indian Patients with a terminal disease like cancer is the current societal need. Since life with dignity is the fundamental right of every Human Being the palliative care if available to larger masses will ensure this right in its fullest way. Currently, the situation of last stage cancer patients became worse due to both pressure financial and side effects of medications. Many families left their near and dear ones to the Hospital with ignorance due to last stage cancer. Thus they need the support of society and palliative care. Life never to be ended without hope and palliative care is bringing hope in patients. The work of Non-Government Organizations is evident in this area but need more agencies to participate in palliative care. The awareness among the public towards palliative care is the most critical aspect and need to be taken up at the forefront by science communication agencies like Vigyan Prasar, NISCAIR. The role of healthcare agencies for proper registration of patients, making them the availability of information of palliative care by Government and other agencies. The review article study concluded that the Palliative Care to be included by the Government in the planning of various plans for Healthcare. The palliative care for different disease needs different pieces of training and support which need to be included by the Educational Institutions in their curriculum. The goal of availability of palliative care to every needy will not possible when public and other agencies join hand to hand and work in a connected way.

Recommendations

The topic of palliative care is sensitive and emotional topic for care of a human being with terminal disease. In the last stage of life when family members of patients became depressed due to continuous care of patients suffering with cancer, AIDS, Tuberculosis etc. The Government and public participation is the urgent need to come up for the palliative care in interests of public. The states have to mobilize funds to the scheme initiated by central government of India. This will reduce financial burden on family members of patients. Recently Government of India announced Ayushyaman Bharat or PM-Jay scheme for providing the health care to needy patients⁵. In India having many different cultures, terrains, languages etc there is big challenge to implement the PM-Jay efficiently. Participation of public, medical healthcare professionals with full support of Government is the current need for healthy and happy India.

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